## 2008 FOR PROFIT CORPORATION

## **FILED ANNUAL REPORT** Apr 15, 2008 08:00 A Secretary of State DOCUMENT # P97000104313 1. Entity Name JCS CHICK, INC. Mailing Address Principal Place of Business P O BOX 15964 1962 CENTERVILLE ROAD TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32317-5964 04132008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3483619 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CHICK, MARTIN J JR 1962 CENTERVILLE ROAD TALLAHASSEE, FL 32308 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME CHICK, MARTIN J JR STREET ADDRESS 1962 CENTERVILLD RD TALLAHASSEE, FL 323175964 CITY-ST-ZIP U00000898378 04/25/08-80087-002 150.00 ST TITLE CHICK, STACY L NAME 1962 CENTERVILLE RD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 323175964 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS مه المسلم أسلام إلى بعد الشاراتيني CITY-ST-ZIP TITLE NAME STREET ADDRESS \_ 10 mg = 1.04 CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other, like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR F IG OFFICER OR DIRECTOR