

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000024804

**FILED**  
**Apr 16, 2005**  
**Secretary of State**

**Entity Name:** J H ANDERSON DEVELOPMENT, INC.

**Current Principal Place of Business:**

1808 SE 7 STREET  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

1822 EDGEWOOD AVE SOUTH  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

PO BOX 460430  
FT. LAUDERDALE, FL 333460430 US

**New Mailing Address:**

**FEI Number:** 65-0827489      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ELLEFSSEN, KRISTINE A  
1808 SE 7 STREET  
FT. LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

ELLEFSSEN, KRISTINE A  
3345 OAK DRIVE  
HOLLYWOOD, FL 33021 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

04/16/2005

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ANDERSON, JOHN H  
Address: 1808 SE 7 STREET  
City-St-Zip: FT. LAUDERDALE, FL 33316 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: ANDERSON, JOHN H  
Address: 1822 EDGEWOOD AVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32205 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTINE A. ELLEFSSEN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

RA

04/16/2005

\_\_\_\_\_  
Date