2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000049647

Entity Name: JOE WATSON, INC.

City-St-Zip:

NOKOMIS, FL 34275

FILED Jul 12, 2005 Secretary of State

•		,			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	EY KEY ROAI 5, FL 34275)			
Current Mailing Address:			New Mailing Address:		
	EY KEY ROAI 5, FL 34275	0			
FEI Number	: 65-0842063	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
3616 CAS	, MARJORIE J EY KEY ROAI 5, FL 34275				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (WATSON, MAI 3616 CAREY I NOKOMIS, FL	KEY	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BURNETT, JO 2430 CENTRA CINCINNATI, C	L PARKWAY	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (WATSON, JOE 3616 CASEY I		Title: (Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOE WATSON DESI 07/12/2005