2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 21, 2008 8:00 am **Secretary of State** DOCUMENT # P98000055796 1. Entity Name 02-21-2008 90021 047 ***150.00 JENKINS CONSTRUCTION, INC. IV Principal Place of Business Mailing Address C/O MORROCA H. JENKINS 11500 NORMANDY BLVD JACKSONVILLE FL 32221 C/O MORROCA H. JENKINS 11500 NORMANDY BLVD JACKSONVILLE FL 32221 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 59-3521589 Not Applicable Zip Country Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JENKINS, MORROCA H 11500 NORMANDY BLVD Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32221 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ıln TITI F Delete TITLE **X** Change Addition JENKINS, MORROCA H NAME NAME 3662-MGSEWOOD-GOURT 11500 Normandy Bvld. STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223 Jax., FL 32221 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition JENKINS, KENNY M NAME STREET ADDRESS 4866 VICTORIA CHASE COURT STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32257 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME JENKINS, MORROCA H NAME 3662 MOSSWOOD COURT 11500 Normandy Blvd. JACKSONVILLE FL 32223 Jax., FL 32221 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Dalete TITLE Change ☐ Addition JENKINS, MARCUS A NAME STREET ADDRESS 4879-VICTORIA CHASE-COURT STREET ADDRESS 175 Sweetbriar Branch Lane JACKSONVILLE FL 32257 CITY-ST-2IP CITY-ST-ZIP Jacksonville, FL 32259 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deiele TITLE Change . ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 attachminar with an address, with all other like amnowered.

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