## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000068917

Entity Name: JAN UNDERWOOD, INC.

FILED Nov 09, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

28402 102ND DRIVE EAST 5549 COLONY LAKE LANE MYAKKA CITY, FL 34251 SARASOTA, FL 34233

Current Mailing Address: New Mailing Address:

28402 102ND DRIVE EAST 5549 COLONY LAKE LANE MYAKKA CITY, FL 34251 SARASOTA, FL 34233

FEI Number: 65-0937957 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

UNDERWOOD, JAN
28402 102ND DRIVE EAST
MYAKKA CITY, FL 34251 US

DAVIES, KATHRYN
5549 COLONY LAKE LANE
SARASOTA, FL 34233 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: KATHRYN DAVIES 11/09/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 UNDERWOOD, JAN C MR.
 Name:
 DAVIES, KATHRYN M MRS

 Address:
 28402 102ND DRIVE EAST
 Address:
 5549 COLONY LAKE LANE

 City-St-Zip:
 MYAKKA CITY, FL 34251 US
 City-St-Zip:
 SARASOTA, FL 34233 US

Title: VP ( ) Delete Title: TREA (X) Change ( ) Addition

 Name:
 UNDERWOOD, FELICIA L MRS.
 Name:
 DAVIES, RALPH MR

 Address:
 28402 102ND DRIVE EAST
 Address:
 5549 COLONY LAKE LANE

 City-St-Zip:
 MYAKKA CITY, FL 34251 US
 City-St-Zip:
 SARASOTA, FL 34233 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: KATHRYN M DAVIES P 11/09/2006