2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 09, 2005 08:00 AM Secretary of State DOCUMENT # S06342 1. Entity Name J.K. PROPERTIES OF BREVARD, INC. Principal Place of Business Mailing Address 903 KENMORE ST P.O. BOX 141 PALM BAY, FL 32907 EAGLE GROVE, IA 50533 05032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3128274 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEADLE, JAMES P DO NOT WRITE 5205 BABCOCK ST NE PALM BAY, FL 32305 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, flegistered Agen) signature required when reinstalling DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be in accordance with \$. 607.193(2)(b), F.S., the \Box Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. PST TITLE HELGEVOLD, KARL A NAME STREET ADDRESS 1383 250TH ST U00000364612 05/09/05-80002-018 150.00 CITY-ST ZIP EAGLE GROVE, IA 50533 TITLE PLAME STREET ADDRESS CITY-ST ZIP TITLE KAME STREET ADDRESS DO NOT WRITE CITY-ST ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 truete 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.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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