

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S16222

Entity Name: JACOBSON CONSULTING, INC.

FILED  
Jan 07, 2005  
Secretary of State

## Current Principal Place of Business:

2323 CURLEW RD  
SUITE 7E  
DUNEDIN, FL 34698

## New Principal Place of Business:

2323 CURLEW RD  
SUITE 7A  
DUNEDIN, FL 34698

## Current Mailing Address:

2323 CURLEW RD  
SUITE 7E  
DUNEDIN, FL 34698

## New Mailing Address:

2323 CURLEW RD  
SUITE 7A  
DUNEDIN, FL 34698

FEI Number: 59-3036288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACOBSON, CHARLES J  
2323 CURLEW ROAD, SUITE 7E  
DUNEDIN, FL 34698 US

## Name and Address of New Registered Agent:

JACOBSON, CHARLES J  
2323 CURLEW ROAD, SUITE 7A  
DUNEDIN, FL 34698 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:

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JACOBSON, CHARLES J  
Address: 4334 BANYAN TREE COURT  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VST ( ) Delete  
Name: GRAY, SHARON M  
Address: 11203 CLAYRIDGE DR  
City-St-Zip: TAMPA, FL 33635

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: JACOBSON, CHARLES J  
Address: 1221 BEAUMONT STREET  
City-St-Zip: JACKSONVILLE, FL 32259

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SHARON M. GRAY

DVP

01/07/2005

Electronic Signature of Signing Officer or Director

Date