2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2007
Secretary of State

DOCUMENT# S30244

Entity Name: N5530J, INC.

Current Principal Place of Business:

4960 ORTEGA FOREST DR
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

1439 WENTWORTH AVE
JACKSONVILLE, FL 32259 US

Current Mailing Address:

4960 ORTEGA FOREST DR
JACKSONVILLE, FL 32210 US

New Mailing Address:

1439 WENTWORTH AVE
JACKSONVILLE, FL 32259 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORMAN, HAROLD-LYNN
4960 ORTEGA FOREST DR
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

CHAPPANO, PAUL J
1439 WENTWORTH AVE
JACKSONVILLE, FL 32259 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: PAUL J CHAPPANO 02/21/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: NORMAN, HAROLD-LYNN
Address: 4960 ORTEGA FOREST DR
City-St-Zip: JACKSONVILLE, FL 32210

Title: STD ( ) Delete
Name: NORMAN, LUCRETIA
Address: 4960 ORTEGA FOREST DR
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CHAPPANO, JILL A
Address: 1439 WENTWORTH AVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: STD (X) Change ( ) Addition
Name: CHAPPANO, PAUL J
Address: 1439 WENTWORTH AVE
City-St-Zip: JACKSONVILLE, FL 32259

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: JILL A CHAPPANO PD 02/21/2007
Electronic Signature of Signing Officer or Director Date