2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S96519

Entity Name: JANABU, INC.

Title:

Name:

Address:

City-St-Zip:

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2139 DOBBS ROAD UNIT 1 ST AUGUSTINE, FL 32086 **New Mailing Address: Current Mailing Address:** 3833 LITTLE LN JACKSONVILLE, FL 32223 FEI Number: 59-3099384 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUENING, JOHN E. 3833 LITTLE LN JACKSONVILLE, FL 32223 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPT () Delete Title: (X) Change () Addition BUENING, JOHN E., Name: Name: BUENING, JOHN E., 3833 LITTLE LN 3833 LITTLE LN Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32223 Title: DVS Title: DVS () Delete (X) Change () Addition Name: BUENING, NANCY G., Name: BUENING, NANCY G., 3833 LITTLE LN 3833 LITTLE LN Address: Address: JACKSONVILLE, FL 32223 City-St-Zip: JACKSONVILLE, FL City-St-Zip: () Delete Title: Title: (X) Change () Addition BUENING, JOHN W. BUENING, JOHN W. Name: Name: 3833 LITTLE LANE 3833 LITTLE LANE Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32223

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

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN E. BUENING **DPT** 04/09/2008

() Delete

() Change (X) Addition

BROWN, SUSAN P

3976 SEA EAGLE CIRCLE

ST. AUGUSTINE, FL 32086