## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Jan 29, 2007 08:00 AM **DOCUMENT # V03280 Secretary of State** 1. Entity Name JWS, INC. II Mailing Address Principal Place of Business 4850 DOCKSIDE DRIVE 4850 DOCKSIDE DRIVE NUMBER 103 NUMBER 103 FT MYERS, FL 33919 FT MYERS, FL 33919 No Chg-P CR2E034 (11/05) 01232007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0311340 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SEVERSON, GEORGE S. DO NOT WRITE 4850 DOCKSIDE DRIVE NUMBER 103 IN THIS SPACE FT. MYERS, FL 33919 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 primed name of registered agent and take if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 1D. OFFICERS AND DIRECTORS TITLE SEVERSON, JERRY W. NAME STREET ADDRESS 4850 DOCKSIDE DR., SUITE 103 CITY-ST-ZIP FT. MYERS, FL TITLE NVAE SEVERSON, HOLLY K U00000609065 02/01/07-80034-021 150.00 STREET ADDRESS **4850 DOCKSINI DR 103** CITY-ST-ZIP FORT MYERS, FL 33919 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-OP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-7/P

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Prisident 231-481-0418 SIGNATURE: TYPED OR PRINTED NAME OF SIGNING OFFICE