## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V22824

FILED Mar 21, 2006 Secretary of State

Entity Name: J & G ENTERPRISES OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

16 HUGHES ST.

FT. WALTON BEACH, FL 32548 US

Current Mailing Address: New Mailing Address:

111 SNOWDRIFT ROAD DESTIN, FL 32550 US

FEI Number: 59-3114422 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:

WOOD, JIMMIE E. HUNOLT, MELANIE WOOD
111 SNOWDRIFT ROAD
DESTIN, FL 32550 US
HUNOLT, MELANIE WOOD
111 SNOWDRIFT ROAD
DESTIN, FL 32550 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: MELANIE WOOD-HUNOLT 03/21/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD ( ) Delete Title: PD/T (X) Change ( ) Addition Name: HUNOLT, MELANIE W HUNOLT, MELANIE W

 Address:
 89 SNOWDRIFT RD
 Address:
 89 SNOWDRIFT RD

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 DESTIN, FL 32550

Title: VD () Delete Title: () Change () Addition Name: WOOD, GEORGIA Name:

 Name:
 WOOD, GEORGIA
 Name:

 Address:
 111 SNOWDRIFT ROAD
 Address:

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:

Title: PD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 WOOD, JIMMIE E
 Name:
 HUNOLT, JOSEPH A

 Address:
 111 SNOWDRIFT ROAD
 Address:
 89 SNOWDRIFT ROAD

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 DESTIN, FL 32550

Title: SD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 HUNOLT, JOSEPH A
 Name:

 Address:
 89 SNOWDRIFT RD
 Address:

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:

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: MELANIE WOOD-HUNOLT PRES 03/21/2006