2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009674

FILED Jan 25, 2007 Secretary of State

Entity Name: JAP WORLD SERVICES EMPLOYEE KATRINA RELIEF FUND. INC

Current Principal Place of Business:		New Principal Place of Business:		
7315 N. A ⁻	TLANTIC AVE	NUE		
ROOM 21		22020		
JAPE CAI	NAVERAL, FL	. 32920		
Current Mailing Address:		New Mailing Address:		
	TLANTIC AVE	NUE		
ROOM 21: CAPE CAI	8 NAVERAL, FL	32920		
El Number	: 20-3560983	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
0 NORTH	GUY O II H LAURA STR	PEET		
ACKSON he above the State	00 IVILLE, FL 32 anamed entity e of Florida.	202 US	ourpose of changing its registere	ed office or registered agent, or both,
ACKSON he above n the State	00 IVILLE, FL 32 e named entity e of Florida. RE:	202 US submits this statement for the p		ed office or registered agent, or both,
The above n the State SIGNATUI	00 IVILLE, FL 32 e named entity e of Florida. RE:	202 US submits this statement for the part of the part of Registered Agree Of Register	ent	
ACKSON The above In the State	OO IVILLE, FL 32 e named entity e of Florida. RE: Electro S AND DIRECTORY SWINDLE, DA	202 US submits this statement for the price Signature of Registered Age CTORS:) Delete VID W JL DR., STE 1113	ent	Date
ACKSON The above to the State SIGNATUI DFFICER title: ame: ddress:	OO IVILLE, FL 32 e named entity e of Florida. RE: Electro S AND DIRECTO DVP (SWINDLE, DA 2231 CRYSTA ARLINGTON, N TD (JENNINGS, JA 7315 N. ATLAN	202 US submits this statement for the price Signature of Registered Agenta CTORS:) Delete MID W LL DR., STE 1113 VA 22202) Delete MMES W	ent ADDITIONS/CHANG Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES W. JENNINGS TD 01/25/2007