

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000045643

FILED
Feb 26, 2008
Secretary of State

Entity Name: B.S. JELTS, INC.

Current Principal Place of Business:

6075 WINGED FOOT DR.
GRAND BLANC, MI 48439

New Principal Place of Business:

Current Mailing Address:

9075 SEMINOLE BLVD.
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 20-4622467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULER, TIMOTHY C
9075 SEMINOLE BOULEVARD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: RACHOR, LUCINDA
Address: 11262 TYRONE TRAIL
City-St-Zip: FENTON, MI 48430

Title: D () Delete
Name: PALM, JULIA
Address: 14219 REBECCA COURT
City-St-Zip: LARGO, FL 33774

Title: D () Delete
Name: DAY, STEPHANIE
Address: 5945 STOUT CREEK CT.
City-St-Zip: BELMONT, MI 49306

Title: D () Delete
Name: MCDONALD, ELIZABETH
Address: 2180 CASCADE LAKES CIR.
City-St-Zip: GRAND RAPIDS, MI 49546

Title: D () Delete
Name: SMITH, TYLER
Address: 1936 SE 21ST STREET
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TIMOTHY C. SCHULER

RA

02/26/2008

Electronic Signature of Signing Officer or Director

_____ Date