

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001092

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: JAARS, INC.

**Current Principal Place of Business:**

7405 JAARS ROAD  
WAXHAW, NC 28173

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 248  
WAXHAW, NC 281730248

**New Mailing Address:**

FEI Number: 56-0818833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOYLES, WILLIAM A  
301 EAST PINE STREET, SUITE 1400  
ORLANDO, FL 32801 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BARKMAN, ELDON  
Address: 6405 OLD RIDGE DR  
City-St-Zip: WAXHAW, NC 28173

Title: V  
Name: JONES, GERRY  
Address: 6907 SHADY OAK LN  
City-St-Zip: WAXHAW, NC 28173

Title: S  
Name: HUTCHINSON, JOHN  
Address: 7600 FARMBROOK DR  
City-St-Zip: WAXHAW, NC 28173

Title: T  
Name: STAPLES, TIM  
Address: 7405 DAVIS RD  
City-St-Zip: WAXHAW, NC 28173

Title: TD  
Name: JOHNSON, DUANE  
Address: 420 CANYON OAKS DR  
City-St-Zip: ARGYLE, TX 76226

Title: D  
Name: MATLOCK, TOM G  
Address: 11584 MONTE VISTA  
City-St-Zip: CHINO, CA 91710

I hereby 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 all other like empowered.

SIGNATURE: JERRY JONES

V

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date