

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051121

**FILED**  
**Apr 25, 2005**  
**Secretary of State**

**Entity Name:** JENNIFER'S MEDICAL MANAGEMENT, INC.

**Current Principal Place of Business:**

609 SEA PINE WAY  
G2  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

509 5TH LANE  
LAKE WORTH, FL 33463

**Current Mailing Address:**

609 SEA PINE WAY  
G2  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

509 5TH LANE  
LAKE WORTH,, FL 33463

**FEI Number:** 32-0074451

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PSTD ( ) Delete  
Name: WALTER, JENNIFER P  
Address: 609 SEA PINE WAY G2  
City-St-Zip: WEST PALM BEACH, FL 33415

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: MCGUINNESS, JENNIFER P  
Address: 509 5TH LANE  
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JENNIFER P. MCGUINNESS

PRES

04/25/2005

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

\_\_\_\_\_  
Date