

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037771

Entity Name: JELLIROLL, INC.

FILED  
Mar 11, 2009  
Secretary of State

**Current Principal Place of Business:**

9890 NW 43RD TERR.  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9890 NW 43RD TERR.  
DORAL, FL 33178

**New Mailing Address:**

FEI Number: 32-0145138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEPNER, MARY  
9890 NW 43RD TERR.  
DORAL, FL 33178 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: DEPNER, STEFAN  
Address: 411 EAST PINE ST  
City-St-Zip: ALTADENA, CA 91001

Title: D ( ) Delete  
Name: DEPNER, MARY  
Address: 9890 NW 43RD TERR.  
City-St-Zip: DORAL, FL 33178

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

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: MARY DEPNER

D

03/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date