

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90245 032 ***150.00

DOCUMENT # P05000046619		
1. Entity Name JERROD PINDER INC		

Principal Place of Business 5319 CONNER TERR PORT CHARLOTTE, FL 33981	Mailing Address 5319 CONNER TERR PORT CHARLOTTE, FL 33981
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40038943



2. Principal Place of Business 1241 Hurtig Ave Suite, Apt. #, etc.	3. Mailing Address 1241 Hurtig Ave Suite, Apt. #, etc.
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03162006 - Chg-P CR2E034 (11/05)

City & State Port Charlotte FL	City & State Port Charlotte FL
Zip 33948	Country USA

4. FEI Number 20-3999713	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GABRIELLINI, ACHILLE 5319 CONNER TERR PORT CHARLOTTE, FL 33981	
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7. Name and Address of New Registered Agent Name: Jerrod Pinder Street Address (P.O. Box Number is Not Acceptable): 1241 Hurtig Ave City: Port Charlotte FL Zip Code: 33948	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: <u>Jerrod Pinder</u> Signature, typed or printed name of registered agent and title if applicable.	DATE: <u>3-22-06</u> (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing - Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GABRIELLINI, ACHILLE 5319 CONNER TERR PORT CHARLOTTE, FL 33981 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PINDER, JERROD 1241 HURTIG AVE PT CHARLOTTE, FL 33948 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TUCKER, JAMES 5319 CONNER TERRACE PT CHARLOTTE, FL 33981 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>Jerrod Pinder</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: <u>3-22-06</u> DAYTIME PHONE: <u>941-276-5121</u>