

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000070934

Entity Name: J.S.V. ENTERPRISES, INC.

FILED  
Mar 18, 2010  
Secretary of State

## Current Principal Place of Business:

5661 DIVISION DRIVE  
FT. MYERS, FL 33905

## New Principal Place of Business:

5661 DIVISION DRIVE  
FORT MYERS, FL 33905

## Current Mailing Address:

JOHN M. WICKER, PA  
PO DRAWER 60205  
FORT MYERS, FL 33906 US

## New Mailing Address:

JOHN M. WICKER, PA  
P.O. DRAWER 60205  
FORT MYERS, FL 33906 US

FEI Number: 65-0443132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WICKER, JOHN M  
12670 NEW BRITTANY BLVD, STE. 101  
FORT MYERS, FL 33907 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: DP  
Name: VICKERS, JAMES S  
Address: 5661 DIVISION DRIVE  
City-St-Zip: FORT MYERS, FL 33905

Title: DVP  
Name: VICKERS, SHANNON A  
Address: 5661 DIVISION DRIVE  
City-St-Zip: FORT MYERS, FL 33905

Title: DT  
Name: VICKERS, THERESA L  
Address: 5661 DIVISION DRIVE  
City-St-Zip: FORT MYERS, FL 33905

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES S. VICKERS

DPS

03/18/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date