2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 343630

Title:

Name:

Address:

City-St-Zip:

DST

WEEKS, SHAUNA L

10837 PINEWOOD CIRCLE

BRADENTON, FL 34211

() Delete

FILED Sep 16, 2009 Secretary of State

Entity Name: DICK, JOHNSON & JEFFERSON, INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1429 60TH AVENUE WEST SUITE 200 BRADENTON, FL 34207					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1429 60TH AVENUE WEST SUITE 200 BRADENTON, FL 34207					
FEI Number:	59-1236185	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DICK,EDWARD K 6235 FORDHAM PL BRADENTON, FL 34207 US			ACKLES, JUDY ANN 13605 5TH AV NE BRADENTON, FL 342		
The above in the State	named entity su of Florida.	ıbmits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE: JUDY ANN ACKLES				09/16/2009	
	Electronic	Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C (X) I DICK,EDWARD I 6235 FORDHAM BRADENTON, FL	PLACE	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address:	DP () E	Pelete A	Title: (Name:) Change ()Addition	
City-St-Zip:	13606 5TH AV N BRADENTON, FL	. 34212	Address: City-St-Zip:		
City-St-Zip: Title: Name: Address: City-St-Zip:	13606 5TH AV N BRADENTON, FL	Delete ARA L M RD	City-St-Zip:) Change () Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JUDY ANN ACKLES DP 09/16/2009

() Change () Addition