2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705628

Entity Name: JOHN PAUL CORPORATION

FILED Jun 10, 2008 Secretary of State

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
	ST DIXIE HIGHWAY IAMI, FL 33161			
Current Mailing Address:		New Maili	New Mailing Address:	
	ST DIXIE HIGHWAY IAMI, FL 33161			
	ce with s. 607.193(2)(b), F.S., the corporation did not rece		e.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
HELD, JEFF 12500 NE 15TH AVENUE #511 NORTH MIAMI, FL 33161 US		12100 WE	MCDEARMAID, MICHAEL 12100 WEST DIXIE HIGHWAY NORTH MIAMI, FL 33161 US	
	named entity submits this statement for the purpose of Florida.	se of changing i	ts registered office or registered agent, or both,	
SIGNATURE: MICHAEL MCDEARMAID			06/10/2008	
	Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete MCDEARMAID, MICHAEL 840 NE 127 ST MIAMI, FL 33161	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete MCENROE, JOHN 13510 SW 6 PLACE DAVIE, FL 33325	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	DS () Delete HELD, JEFF 12500 NE 15 AVENUE # 511 NORTH MIAMI, FL 33161	Title: Name: Address: City-St-Zip:	DS (X) Change () Addition SEIFRIED, KEVIN 12665 N.W. 8TH AVE, NORTH MIAMI, FL 33168	
Title: Name: Address: City-St-Zip:	TD () Delete ROMANIK, TOM 195 N.W. 103RD ST MIAMI SHORES, FL 33150	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SEIFRIED, KEVIN 12665 N.W. 8TH AVE MIAMI, FL 33168	Title: Name: Address: City-St-Zip:	D (X) Change () Addition SMITH, STEVE 11711 WEST BISCAYNE CANAL DRIVE MIAMI, FL 33161	
Title: Name: Address: City-St-Zip:	D () Delete SANFILIPPO, SAM 1015 NE 127TH STREET NORTH MIAML FL 33161	Title: Name: Address: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL MCDEARMAID PRES 06/10/2008