2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 716467

Entity Name: JENNIFER SHORES, INC.

Current Principal Place of Business:

2850 GULF SHORE BLVD N
MGR
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

2850 GULF SHORE BLVD N
MGR
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-1310065 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHORT, MEL
2850 GULF SHORE BLVD. N.
APT. 403
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

GAFFNEY, KEVIN
3400 TAMIAMI TRAIL N.
302
NAPLES, FL 34103 US

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: KEVIN GAFFNEY 05/01/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVS ( ) Delete
Name: SCOTT, WILLIAM
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: DV ( ) Delete
Name: FEKKES, ROBERT
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: DT ( ) Delete
Name: MAUE, HOWARD
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: PD ( ) Delete
Name: SHORT, MEL
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: DT ( ) Delete
Name: DAVIS, J. N.
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: HOWARD MAUE DT 05/01/2006
Electronic Signature of Signing Officer or Director Date