

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716467

FILED
Apr 30, 2009
Secretary of State

Entity Name: JENNIFER SHORES, INC.

Current Principal Place of Business:

2850 GULF SHORE BLVD N
MGR
NAPLES, FL 34103

New Principal Place of Business:

4306 ARNOLD AVENUE
NAPLES, FL 34104

Current Mailing Address:

2850 GULF SHORE BLVD N
MGR
NAPLES, FL 34103

New Mailing Address:

P.O. BOX 110339
NAPLES, FL 34108

FEI Number: 59-1310065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

KUETER, BEVERLY
4306 ARNOLD AVENUE
NAPLES, FL 34104 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: BEVERLY KUETER

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DV () 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: MIZEUR, LEON
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: DS () Delete
Name: GRECO, LAURETTE
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: D (X) Change () Addition
Name: FEKKES, ROBERT
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

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

Title: DS (X) Change () Addition
Name: SHAW, BARBARA
Address: 2850 GULF SHORE BLVD. NORTH
City-St-Zip: NAPLES, FL 34103

Title: DP (X) Change () Addition
Name: GRECO, LAURETTE
Address: 2850 GULF SHORE BLVD NORTH
City-St-Zip: NAPLES, FL 34103

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: LAURETTE GRECO

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date