2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# 766874

Entity Name: JEFF INDUSTRIES, INC.

Current Principal Place of Business:

115 E. COAST AVE.
HYPOLUXO, FL 33462

New Principal Place of Business:

Current Mailing Address:

115 EAST COAST AVENUE
HYPOLUXO, FL 33462

New Mailing Address:

FEI Number: 59-2516157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROBERTS, CLAUDIA M.
5077 WILLOW POND ROAD
WEST PALM BEACH, FL 33417 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VERNIS, G. JEFFREY
Address: 6731 140TH LN
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: S ( ) Delete
Name: GOODMAN, ROBERT
Address: 7554 CHARING CROSS LANE
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: V ( ) Delete
Name: ZAFERO, FRANCINE
Address: 1001 BEDFORD AVE
City-St-Zip: PALM BEACH GARDEN, FL 33403 US

Title: T ( ) Delete
Name: LANDY, PATRICK
Address: 6261 WINDCHIME PLACE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D ( ) Delete
Name: COHAN, DOLLY
Address: 9132 COVE POINT CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D ( ) Delete
Name: BLOOM, HARRIET
Address: 1040 SW 22 AVENUE V-15-2
City-St-Zip: DELRAY BEACH, FL 11445 US

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:

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: CLAUDIA M. ROBERTS EXEC 04/09/2007

Electronic Signature of Signing Officer or Director — Date