2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008
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 ( )**

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 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 ED 01/23/2008

Electronic Signature of Signing Officer or Director — Date