

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 823832

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: JUNGLE LARRY'S ZOOLOGICAL PARK, INC.

**Current Principal Place of Business:**

1590 GOODLETTE RD  
NAPLES, FL 34102 US

**New Principal Place of Business:**

**Current Mailing Address:**

1590 GOODLETTE RD  
NAPLES, FL 34102

**New Mailing Address:**

5841 SPANISH OAKS LANE  
NAPLES, FL 34119

FEI Number: 34-0966117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TETZLAFF, NANCY  
5841 SPANISH OAKS LANE  
NAPLES, FL 34119 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VSD ( ) Delete  
Name: TETZLAFF, DAVID,  
Address: 5823 SPANISH OAKS LANE  
City-St-Zip: NAPLES, FL 34119

Title: PD ( ) Delete  
Name: TETZLAFF, NANCY,  
Address: 5841 SPANISH OAKS LANE  
City-St-Zip: NAPLES, FL 34119

Title: TD ( ) Delete  
Name: RAESE, WARREN,  
Address: 3376 E SMITH RD  
City-St-Zip: MEDINA, OH 44256

Title: VD ( ) Delete  
Name: TETZLAFF, TIM,  
Address: 605 DEERWOOD AVE  
City-St-Zip: GAHANNA, OH 43230

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY TETZLAFF

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date