

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