

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 26, 2005  
Secretary of State**

DOCUMENT# F00000000938

Entity Name: JERSEYANS AGAINST DRUNK DRIVING INC.

**Current Principal Place of Business:**

1005 PINE ST  
CLEARWATER, FL 33756

**New Principal Place of Business:**

2359 FINLANDIA LANE  
SUITE 63  
CLEARWATER, FL 33763

**Current Mailing Address:**

2359 FINLANDIA LANE  
SUITE 63  
CLEARWATER, FL 33763

**New Mailing Address:**

FEI Number: 22-3653545      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LIBES, RICHARD D  
2359 FINLANDIA LANE  
SUITE 63  
CLEARWATER, FL 33763 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: PD ( ) Delete  
Name: LIBES, RICHARD D  
Address: 2359 FINLANDIA LANE SIUTE 63  
City-St-Zip: CLEARWATER, FL 33763

Title: CD ( ) Delete  
Name: LABRIODA, APRIL  
Address: 2458 COLUMBIA DR., SUITE 2  
City-St-Zip: CLEARWATER, FL 33763

Title: S ( ) Delete  
Name: JENKINS, BOB  
Address: 302 1ST AVE.  
City-St-Zip: ASBURY PARK, NJ

Title: T ( ) Delete  
Name: LIBES, SHERRY  
Address: 6010 BLVD WEST  
City-St-Zip: WEST NEW YORK, NJ 07093

**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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD D LIBES

PD

04/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date