

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2007 08:00 AM
Secretary of State

DOCUMENT # F04000003635

1. Entity Name
JACKIE L.H. CORPORATION



Principal Place of Business
24690 SANDHILL BLVD.
SUITE 604 & 605
PUNTA GORDA, FL 33983

Mailing Address
24690 SANDHILL BLVD.
SUITE 604 & 605
PUNTA GORDA, FL 33983



02272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1242430

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZEHR, MARK
24690 SANDHILL BLVD.
SUITE 604 & 605
PUNTA GORDA, FL 33983

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000654223
03/13/07-80054-001 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CPT
ZEHR, JULIE P
24690 SANDHILL BLVD., SUITE 604 & 605
PUNTA GORDA, FL 33983

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCVP
ZEHR, MARK D
24690 SANDHILL BLVD., SUITE 604 & 605
PUNTA GORDA, FL 33983

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
ZEHR, MARK D
24690 SANDHILL BLVD., SUITE 604 & 605
PUNTA GORDA, FL 33983

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-22nd/2007 941-766-7378