

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003607

FILED  
Mar 14, 2011  
Secretary of State

**Entity Name:** BARBARA JEAN'S HOLDINGS, INC.

**Current Principal Place of Business:**

214 MALLERY STREET  
ST. SIMONS ISLAND, GA 31532

**New Principal Place of Business:**

**Current Mailing Address:**

4446 HENDRICKS AVE.  
203  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:** 20-8572656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DPT  
Name: BARTA, JAMES J  
Address: 214 MALLERY STREET  
City-St-Zip: ST. SIMONS ISLAND, GA 31532

Title: DS  
Name: BARTA, BARBARA JEAN  
Address: 214 MALLERY STREET  
City-St-Zip: ST. SIMONS ISLAND, GA 31532

Title: DT  
Name: TILBROOK, JAMES M  
Address: 4446 HENDRICKS AVE, PMB 203  
City-St-Zip: JACKSONVILLE, FL 32207

Title: DVP  
Name: GRAHAM, LISA B  
Address: 47 FERRY ROAD  
City-St-Zip: BEAUFORT, SC 29907

I hereby 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 all other like empowered.

SIGNATURE: JAMES M TILBROOK

DT

03/14/2011

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

\_\_\_\_\_  
Date