

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F47511

Entity Name: YANNI VENTURES, INC.

FILED  
Jan 15, 2009  
Secretary of State

## Current Principal Place of Business:

2800 N. PONCE DE LEON BLVD.  
ST AUGUSTINE, FL 32084 US

## New Principal Place of Business:

## Current Mailing Address:

2800 N. PONCE DE LEON BLVD.  
ST AUGUSTINE, FL 32084 US

## New Mailing Address:

FEI Number: 59-2159667

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PALMETTO CHARTER SERVICES, INC.  
444 SEABREEZE BLVD SUITE 920  
DAYTONA BEACH FL, FL US

## Name and Address of New Registered Agent:

PALMETTO CHARTER SERVICES, INC.  
444 SEABREEZE BLVD  
SUITE 920  
DAYTONA BEACH, FL US

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:

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LASSITER, LORRAINE,  
Address: 321 REDWING LANE  
City-St-Zip: ST AUGUSTINE BH, FL 32080

Title: P ( ) Delete  
Name: NOFAL, MARILYN,  
Address: 224 JOEY DR.  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: V ( ) Delete  
Name: LASSITER, CHARLES M.,  
Address: 321 REDWING LANE  
City-St-Zip: ST. AUGUSTINE, FL 3208

Title: DS ( ) Delete  
Name: YANNI, JOHN  
Address: 38 LEE COURT  
City-St-Zip: ST. AUGUSTINE, FL 32080

## 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: CHARLES M. LASSITER

V

01/15/2009

Electronic Signature of Signing Officer or Director

Date