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FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000002923 (8)

1. Corporation Name

JENNY CRAIG OPERATIONS, INC.

Principal Place of Business

Mailing Address

11355 NORTH TORREY
PINES RD.
LA JOLLA CA 92037
US

1355 NORTH TORREY
PINES RD.
LA JOLLA CA 92037
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1996

4. FEI Number

33-0686391

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

11355 NORTH TORREY

Suite, Apt. #, etc.

27

PINES ROAD

City & State

28

LA JOLLA, CA

Zip

Country

29

92037

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME LA BONTE, C J
STREET ADDRESS 11355 NORTH TORREY PINES RD.
CITY-ST-ZIP LA JOLLA CA

TITLE V ☐ DELETE

NAME KELLY, JAMES
STREET ADDRESS 11355 NORTH TORREY PINES ROAD
CITY-ST-ZIP LA JOLLA CA

TITLE DC ☐ DELETE

NAME CRAIG, SIDNEY
STREET ADDRESS 11355 NORTH TORREY PINES RD.
CITY-ST-ZIP LA JOLLA CA

TITLE D ☐ DELETE

NAME CRAIG, GENEVIEVE
STREET ADDRESS 11355 NORTH TORREY PINES RD.
CITY-ST-ZIP LA JOLLA CA

TITLE T ☐ DELETE

NAME JEUB, MICHAEL
STREET ADDRESS 11355 NORTH TORREY PINES RD.
CITY-ST-ZIP LA JOLLA CA

TITLE S ☐ DELETE

NAME SEARS, MARVIN
STREET ADDRESS 212 AVE. OF THE STARS, STE. 2700
CITY-ST-ZIP LOS ANGELES CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P/D
CRAIG, GENEVIEVE
11355 NORTH TORREY PINES ROAD
LA JOLLA, CA 92037

S
SEARS, MARVIN
2049 CENTURY PARK EAST, SUITE 3200
LOS ANGELES, CA 90067-3206

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)