

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H38034

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** JENEET INVESTMENT AND CONSULTING, INC.

**Current Principal Place of Business:**

390 NE EDGEWATER DR  
RIVER VILLAGE APT 1-101  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

53 LAKE ST  
SHERBORN, MA 01770 US

**New Mailing Address:**

**FEI Number:** 59-2487945

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALSH, TIMOTHY  
390 N.E. EDGEWATER DR  
RIVER VILLAGE, APT 1-101, IRP  
STUART, FL 34994 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: V  
Name: WALSH, TIMOTHY  
Address: 303 KILVERT ST  
City-St-Zip: WARWICK, RI 02886 US

Title: V  
Name: WALSH, EDWARD D  
Address: 303 KILVERT ST  
City-St-Zip: WARWICK, RI 02886 US

Title: PTS  
Name: WALSH-FITZ, EILEEN  
Address: 303 KILVERT ST  
City-St-Zip: WARWICK, RI 02886 US

Title: V  
Name: WALSH, ERIC  
Address: 303 KILVERT ST  
City-St-Zip: WARWICK, RI 02886 US

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: EILEEN WALSH-FITZ

PTS

01/05/2011

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

\_\_\_\_\_  
Date