

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2007 8:00 am
Secretary of State

03-27-2007 90014 005 ***150.00

DOCUMENT # H75489

1. Entity Name
JOINER'S ENTERPRISES, INC.



Principal Place of Business
4973 JOINER CIRCLE
MILTON, FL 32583

Mailing Address
4973 JOINER CIRCLE
MILTON, FL 32583

40042546



02222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2587499

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

JOINER, W. L.
4973 JOINER CIRCLE
MILTON, FL 32583

**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 reinstating) 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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	JOINER, W. L.
STREET ADDRESS	4973 JOINER CIRCLE
CITY-ST-ZIP	MILTON, FL 32583
TITLE	VP
NAME	LAMAR, JODY Joiner, Jody L.
STREET ADDRESS	4970 JOINER CIRCLE
CITY-ST-ZIP	MILTON, FL 32583
TITLE	ST
NAME	JERNIGAN, KIMBERLY
STREET ADDRESS	4962 JOINER CIRCLE
CITY-ST-ZIP	MILTON, FL
TITLE	T
NAME	CHANDA, JOINER Joiner, Chanda
STREET ADDRESS	4970 JOINER CIR
CITY-ST-ZIP	MILTON, FL 32583
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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: Chanda Joiner Chanda Joiner

3/15/07
Date

850-623-5598
Daytime Phone #