


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J34935</b> 1. Entity Name JANCAR DEVELOPMENT, INC.	
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Principal Place of Business 450 NORTHMOON AVE N ST PETERSBURG, FL 33702 US	Mailing Address 450 NORTHMOON AVE N ST PETERSBURG, FL 33702 US
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04102007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2775559	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  DENNIE, JANET 450 NORTHMOOR AVE. N. SAINT PETERSBURG, FL 33702
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) 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

U000000707568  
04/24/07-80080-008 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DENNIE, JANET 450 NORTHMOOR AVE. N. ST. PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DENNIE, MORGAN 450 NORTHMOOR AVE. N. ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DENNIE ADAM P 2843 29TH AVE NORTH ST PETERSBURG, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
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:** Janet Dennie 4/10/07 727-522-2381  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #