

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41871

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** JS CAPITAL MANAGEMENT, INC.

**Current Principal Place of Business:**

851 SE MONTEREY COMMONS BLVD  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

851 SE MONTEREY COMMONS BLVD  
STUART, FL 34996

**New Mailing Address:**

**FEI Number:** 59-2743838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOWLER, WILLIAM C  
851 SE MONTEREY COMMONS BLVD  
STUART, FL 34996 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:** CHD  
**Name:** SULLIVAN, JOHN W.  
**Address:** 7315 SE GOLFHOUSE DR  
**City-St-Zip:** HOBE SOUND, FL 33455

**Title:** VD  
**Name:** SULLIVAN, SUSAN R.  
**Address:** 7315 SE GOLFHOUSE DR  
**City-St-Zip:** HOBE SOUND, FL 33455

**Title:** D  
**Name:** SANFORD, JENNIFER SULLIV  
**Address:** 1725 ATLANTIC AVENUE  
**City-St-Zip:** SULLIVANS ISLAND, SC 29482

**Title:** PD  
**Name:** FOWLER, WILLIAM C  
**Address:** 851 SE MONTEREY COMMONS BLVD  
**City-St-Zip:** STUART, FL 34996

**Title:** D  
**Name:** BOWEN, GIERIET S  
**Address:** 721 MCLEAN AVE  
**City-St-Zip:** KENILWORTH, IL 60043

**Title:** D  
**Name:** SULLIVAN, JOHN W JR  
**Address:** 1021 ELM STREET  
**City-St-Zip:** WINNETKA, IL 60093

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:** WILLIAM C. FOWLER

PRES

04/10/2012

Electronic Signature of Signing Officer or Director

Date