

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # L13794

1. Entity Name
JDR ENTERPRISES, INC.



Principal Place of Business
1387 S. BABCOCK ST
MELBOURNE, FL 32901

Mailing Address
1387 S. BABCOCK ST
MELBOURNE, FL 32901

08 JUL 28 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07222008

Chg-P

CR2E034 (12/06)

4. FEI Number

59-2967545

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REAM, JUDITH E
1387 S. BABCOCK ST
MELBOURNE, FL 32901

7. Name and Address of New Registered Agent

Name Zimak, Jennifer E.

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

1590 Studley Dr.

City Palm Bay

FL

Zip Code 32907

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

Jennifer E Zimak

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

(NOTE: Registered Agent signature required when reinstating)

7.23.08

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☒ Delete
NAME REAM, JUDITH E.
STREET ADDRESS 1919 CENTRAL BLVD.
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Change ☒ Addition
NAME Zimak, Jennifer E.
STREET ADDRESS 1590 Studley Dr.
CITY-ST-ZIP Palm Bay, FL 32907

TITLE ST ☐ Change ☒ Addition
NAME Zimak, John D.
STREET ADDRESS 1590 Studley Dr.
CITY-ST-ZIP Palm Bay, FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Jennifer E Zimak

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.23.08

Date

Daytime Phone #

321 676-0000