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CORPORATION
ANNUAL REPORT

1995

5-1095



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L55858

(9)

1. Corporation Name

JEANNIE'S OF PALM HARBOR, INC.

Principal Place of Business

2454 MCMULLEN BOOTH #303
CLEARWATER FL 34619

Mailing Address

2454 MCMULLEN BOOTH #303
CLEARWATER FL 34619

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified

03/05/1990

3a. Date of Last Report

04/01/1994

4. FEI Number

59-3001920

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.002
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

State Apt. # etc.

22

State Apt. # etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

BENARD, JEANNIE M
2824 COUNTRYSIDE BLVD #323
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0903 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE

(If the Agent is a corporation, the registered agent of the corporation)

(If the Registered Agent is a corporation, the registered agent of the corporation)

(Name)

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1	PD
NAME	BENARD, JEANNIE
STREET ADDRESS	2824 COUNTRYSIDE BL #323
CITY, ST, ZIP	CLEARWATER FL
12.2	TD
NAME	DAVIDSON, LINDA
STREET ADDRESS	2820 ENTERPRISE 14
CITY, ST, ZIP	CLEARWATER FL
12.3	SD
NAME	WEIKEL, LAURA
STREET ADDRESS	8270 140TH ST
CITY, ST, ZIP	SEMINOLE FL
12.4	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.5	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
12.6	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13.1	Change	Addition
13.1 NAME		
13.1 STREET ADDRESS		
13.1 CITY, ST, ZIP		
13.2	Change	Addition
13.2 NAME		
13.2 STREET ADDRESS		
13.2 CITY, ST, ZIP		
13.3	Change	Addition
13.3 NAME		
13.3 STREET ADDRESS		
13.3 CITY, ST, ZIP		
13.4	Change	Addition
13.4 NAME		
13.4 STREET ADDRESS		
13.4 CITY, ST, ZIP		
13.5	Change	Addition
13.5 NAME		
13.5 STREET ADDRESS		
13.5 CITY, ST, ZIP		
13.6	Change	Addition
13.6 NAME		
13.6 STREET ADDRESS		
13.6 CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b), Florida Statutes. I further certify that the information submitted on this annual report or supplemental annual 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 registered agent or trustee empowered to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this document or on an official filing with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

Jeannie Benard, Pres.

3/15/95 225-4997