

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007926

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE JOY OF GIVING, INC.

Current Principal Place of Business:

317 NASSAU COURT
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

317 NASSAU COURT
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 59-3683777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, FREDERICK C
950 NORTH COLLIER BLVD SUITE 201
MARCO ISLAND, FL 34145 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: DP () Delete
Name: DAVIS, NICOLA T
Address: 317 NASSAU COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: DVT () Delete
Name: DAVIS, F. DOUGLAS
Address: 317 NASSAU COURT
City-St-Zip: MARCO ISLAND, FL 34145

Title: DS () Delete
Name: FLYNN, LAUREN
Address: 1250 ARUBA CT
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLA T. DAVIS

DP

04/13/2009

Electronic Signature of Signing Officer or Director

Date