

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000896

Entity Name: JNN FOUNDATION, INC.

FILED  
Apr 21, 2004  
Secretary of State

## Current Principal Place of Business:

7200 LAKE ELLENOR DR.  
146  
ORLANDO, FL 32809

## New Principal Place of Business:

721 VERONA ST  
KISSIMMEE, FL 34741

## Current Mailing Address:

7200 LAKE ELLENOR DR.  
146  
ORLANDO, FL 32809

## New Mailing Address:

721 VERONA ST  
KISSIMMEE, FL 34741

FEI Number: 59-3699113

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SALLEY, STEPHEN  
450 SOUTH ORANGE AVE #650  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

KELLY, CLINE R DIRECTO  
2150 PINE NEEDLE TR  
KISSIMMEE, FL 34746 US

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: KELLY R CLINE

04/21/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FERNANDEZ, WILLIAM J  
Address: 2200 PINE NEEDLE TR.  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: MCLEAN, ALEXANDER J  
Address: 9653 CROWN PRINCE LANE  
City-St-Zip: WINDERMERE, FL 347866206

Title: D ( ) Delete  
Name: MCLEAN, DENISE I  
Address: 9653 CROWN PRINCE LANE  
City-St-Zip: WINDERMERE, FL 347866206

Title: D ( ) Delete  
Name: CLINE, KELLY  
Address: 2150 PINE NEEDLE TR.  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: VIERA, JESICA  
Address: 3904 STONEFIELD DR.  
City-St-Zip: ORLANDO, FL 32826

Title: D ( ) Delete  
Name: CARIERA, DEBORAH  
Address: 5560 SHORE CT.  
City-St-Zip: NORTH BAY, FL 32819

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FERNANDEZ, WILLIAM E  
Address: 2200 PINE NEEDLE TR.  
City-St-Zip: KISSIMMEE, FL 34746

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

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

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

Title: D (X) Change ( ) Addition  
Name: SHAFFER, BRADLEY  
Address: 2151 PINE NEEDEL TR  
City-St-Zip: KISSIMMEE, FL 34746

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KELLY R CLINE

D

04/21/2004

Electronic Signature of Signing Officer or Director

Date