2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000001122

1. Entity Name

JOY TO THE WORLD, INC.



Mailing Address

1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401

Principal Place of Business

1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401

FILED Jan 17, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01122006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 03-0398021

| Applied For | Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TILLETT, MICHAEL 1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

				IN	IHIS SPACE
	named entity submits this statement for the pions of registered agent.) urpose of changing its registere	ed office or n	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable. (NOTE Registered	l Agent signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP TILLETT, MICHAEL 1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401	CTORS			000000389609 01/20/06-80050-024 61,25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TILLETT, SAMUEL 1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401	-			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	DT TILLETT, SAMUEL 1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401	- -			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS TILLETT, FARTA 1701 PRESIDENTIAL WAY #A101 WEST PALM BEACH, FL 33401			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-5T-ZIP					·.

12. Thereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/06

561-803-2465

Daytime Phone #