## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002006

Entity Name: JEANNIE'S JUNGLE WILDLIFE REHAB, INC.

FILED Apr 30, 2007 Secretary of State

1796 MOBLEY HEIGHTS RD 95190 MOBLEY HEIGHTS RD FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

1796 MOBLEY HEIGHTS RD PO BOX 15486

FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32035

FEI Number: 32-0143490 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ADAMS, JEANNIE
1796 MOBLEY HEIGHTS RD
ADAMS, JEANNIE
95190 MOBLEY HEIGHTS RD

FERNANDINA BEACH, FL 32034 US FERNANDINA BEACH, FL 32034 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: JEANNIE ADAMS 04/30/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition ADAMS, JEANNIE ADAMS, JEANNIE Name: Name: 1796 MOBLEY HEIGHTS RD Address: 95190 MOBLEY HEIGHTS RD Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: ( ) Change (X) Addition Name: Name: DUEY, CRAIG Address: Address: 940272 OLD NASSAUVLLE ROAD City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: SEC ( ) Change (X) Addition HUMPHREY, BRENDA Name: Name: Address: Address: 17513 NE 28TH ST City-St-Zip: City-St-Zip: STARKE, FL 32091

Title: ( ) Delete Title: TRES ( ) Change (X) Addition

Name: Name: ENSLEY, ELEANOR Address: 1701 CLINCH DRIVE

City-St-Zip: City-St-Zip: FERNANDINA BEACH, FL 32034

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: JEANNIE ADAMS PRES 04/30/2007