

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010665

FILED
Apr 27, 2006
Secretary of State

Entity Name: J & L DISCOUNT THRIFT, INC.

Current Principal Place of Business:

2128 1/2 WEST COLONIAL DRIVE
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

6415 POWER POINTE CIRCLE
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 51-0556239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZANDERS, BETTY
119-C GEORGETOWN DRIVE
ORLANDO, FL 32707 US

Name and Address of New Registered Agent:

HOWELL, JERRY R
6415 POWER POINTE CIRCLE
ORLANDO, FL 32818 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: JERRY ROWLAND HOWELL

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOWELL, JERRY R
Address: 6415 POWER POINTE CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: VP () Delete
Name: HOWELL, LINDA
Address: 6415 POWER POINTE CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: TRE () Delete
Name: HOWELL, CHAKEBA
Address: 6415 POWER POINTE CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: SEC () Delete
Name: HOWELL, JERRY JR.
Address: 6415 POWER POINTE CIRCLE
City-St-Zip: ORLANDO, FL 32818

Title: ADV () Delete
Name: ZANDERS, BETTY
Address: 119-C GEORGETOWN DRIVE
City-St-Zip: ORLANDO, FL 32707

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:

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 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: JERRY HOWELL

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date