## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000001902

City-St-Zip:

TALLEVAST, FL 34270 US

FILED Apr 19, 2008 Secretary of State

Entity Name: JOSEPH DEVINEAUX INTERNATIONAL, INC. **Current Principal Place of Business: New Principal Place of Business:** 761 BROADOAK LOOP SANFORD, FL 32771 **Current Mailing Address: New Mailing Address:** 761 BROADOAK LOOP SANFORD, FL 32771 FEI Number: 33-1132213 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEVINEAUX, JOSEPH DEVINEAUX, JOSEPH L OWNER 761 BROADÓAK LOOP 761 BROADOAK LOOP SANFORD, FL 32771 US SANFORD, FL 32771 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: JOSEPH DEVINEAUX 04/19/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEVINEAUX, JOSEPH Name: Name: 761 BROADOAK LOOP Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: () Delete Title: () Change () Addition DEVINEAUX, HEATHER Name: Name: Address: 761 BROADOAK LOOP Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: () Delete Title: () Change () Addition HILL, ROGER Name: Name: Address: 5203 39TH AVE. E Address: City-St-Zip: BRADENTON, FL 34208 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: MARTIN, DAVID DOCTOR Name: MARTIN, DAVID 6750 N. ORANGE BLOSSOM TRAIL Address: Address: 6750 N. ORANGE BLOSSOM TRAIL City-St-Zip: ORLANDO, FL 32860 US City-St-Zip: ORLANDO, FL 32860 US Title: ( ) Delete Title: (X) Change ( ) Addition DIMARTINO, JESSE PASTOR DIMARTINO, JESSE Name: Name: P.O. BOX 355 P.O. BOX 355 Address: Address:

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.

City-St-Zip:

SIGNATURE: JOSEPH DEVINEAUX **PRES** 04/19/2008

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