

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # N06000004639

1. Entity Name
JCLS FOUNDATION, INC.



Principal Place of Business

5033 BERMUDA CIRCLE
ORLANDO, FL 32808

Mailing Address

5033 BERMUDA CIRCLE
ORLANDO, FL 32808



03192008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0579209

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAULINO, RICK H
5033 BERMUDA CIRCLE
ORLANDO, FL 32808

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Rick H. Paulino, Registered Agent

03/20/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME PAULINO, RICK H
STREET ADDRESS 5033 BERMUDA CIRCLE
CITY-ST-ZIP ORLANDO, FL 32808

TITLE PT
NAME PAULINO, RICK H
STREET ADDRESS 5033 BERMUDA CIRCLE
CITY-ST-ZIP ORLANDO, FL 32808

TITLE VS
NAME PAULINO, ALBINA C
STREET ADDRESS 5033 BERMUDA CIRCLE
CITY-ST-ZIP ORLANDO, FL 32808

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

U00000868889
04/09/08-80027-010 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rick H. Paulino, President

03/20/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

407-792-0200