2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007341

FILED Feb 13, 2012 Secretary of State

Entity Name: JJ ESOTERIC FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

27642 IMPERIAL SHORES BLVD BONITA SPRINGS, FL 34134

Current Mailing Address: New Mailing Address:

PO BOX 754

CHAPPAQUA, NY 10514

FEI Number: 26-0201483 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:

SALMONS, KELLY H
PORTER, TRISHA

16112 PARQUE LANE 27642 IMPERIAL SHORES BLVD BONITA SPRINGS, FL 34134 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: TRISHA PORTER 02/13/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: BLOOM, BERNADETTE

Address: PO BOX 754

City-St-Zip: CHAPPAQUA, NY 10514

Title: D

Name: SLOWIK, SHARON Address: PO BOX 754

City-St-Zip: CHAPPAQUA, NY 10514

Title: D

Name: BENTZEN, ANNE Address: PO BOX 754

City-St-Zip: CHAPPAQUA, NY 10514

Title: 1

Name: PORTER, TRISHA

Address: 27642 IMPERIAL SHORES BLVD City-St-Zip: BONITA SPRINGS, FL 34134

Title:

Name: CALLAHAN, KENDALL Address: PO BOX 754

City-St-Zip: CHAPPAQUA, NY 10514

Title: [

 Name:
 NUCCIO, CATHERINE

 Address:
 2671 53RD TERRACE SW

 City-St-Zip:
 NAPLES, FL 34116

I hereby 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 all other like empowered.

SIGNATURE: BERNADETTE BLOOM P 02/13/2012