

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007074

FILED
May 29, 2009
Secretary of State

Entity Name: JULYN'S CORNER HOUSE OF NEW BEGINNINGS, INC.

Current Principal Place of Business:

931 S. SEMORAN BLVD., STE 202
WINTER PARK, FL 32792

New Principal Place of Business:

931 S. SEMORAN BLVD.
#202
WINTER PARK, FL 32792

Current Mailing Address:

931 S. SEMORAN BLVD., STE 202
WINTER PARK, FL 32792

New Mailing Address:

343 LAKE HILL PLACE
APOPKA, FL 32703

FEI Number: 26-3505397 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RUDOLPH, WALLACE M
931 S. SEMORAN BLVD., STE 202
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: JONES, JOHNNIE E
Address: 343 LAKE HILL PL.
City-St-Zip: APOPKA, FL 32703

Title: P () Delete
Name: CAREY-JONES, ROSETTA
Address: 343 LAKE HILL PL.
City-St-Zip: APOPKA, FL 32703

Title: ST () Delete
Name: TURNER, RITA L
Address: 1939 TINDARO DR.
City-St-Zip: APOPKA, FL 32703

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:

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: ROSETTA CAREY-JONES

CEO

05/29/2009

Electronic Signature of Signing Officer or Director

Date