

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004164

**FILED**  
**Jul 20, 2010**  
**Secretary of State**

**Entity Name:** JOLIE'S PLACE INC.

**Current Principal Place of Business:**

1156 SE CORAL REEF STREET  
PORT ST LUCIE, FL 34983

**New Principal Place of Business:**

8676 GRIFFIN ROAD  
COOPER CITY, FL 33328

**Current Mailing Address:**

1156 SE CORAL REEF STREET  
PORT ST LUCIE, FL 34983

**New Mailing Address:**

8676 GRIFFIN ROAD  
COOPER CITY, FL 33328

**FEI Number:** 26-4803330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID M. SCHEINMAN CPA PA  
11919 OAK LEAF DRIVE  
DAVIE, FL 33330 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: D  
Name: THEISEN, CHARLES  
Address: 5101 SW 199 AVE  
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D  
Name: SALESSES, JACK  
Address: 1985 TRACY CT  
City-St-Zip: NORTH POLE, AK 99705

Title: D  
Name: BARELA, JOHN DR.  
Address: 13025 S 270 EAST AVENUE  
City-St-Zip: COWETA, OK 74429

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:** CHARLIE THEISEN

PRES

07/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date