

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90017 011 ****61.25

DOCUMENT # N40908

1. Entity Name
JENSEN STATION SHOPS OWNER'S ASSOCIATION, INC.



Principal Place of Business
 3190 NE MAPLE AVE
 JENSEN BEACH, FL 34957 US

Mailing Address
 3190 NE MAPLE AVE
 JENSEN BEACH, FL 34957 US

54012689



02232004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 65-0677097 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WACHA JR., FRANK
 1901 NE JENSEN BCH BLVD
 JENSEN BEACH, FL 34957

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

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, 2004

9. Election Campaign Financing **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE STD
NAME PERRIN, NITA
STREET ADDRESS 3224 NE MAPLE AVE
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE PD
NAME GERLEY, VICTOR J.
STREET ADDRESS 3190 N.W. MAPLE AVENUE
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE VPD
NAME PERRIN, MIKE
STREET ADDRESS 3177 NE MAPLE AVE
CITY-ST-ZIP JENSEN BEACH, FL 34957

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CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

V.I. Gerley
 V.I. GERLEY
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-04 772.334-2600
 Date Daytime Phone #