

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000021818

Entity Name: JOLA, INCORPORATED

FILED  
Feb 12, 2009  
Secretary of State

## Current Principal Place of Business:

408 W UNIVERSITY AVE.  
STE. 303  
GAINESVILLE, FL 32601

## New Principal Place of Business:

6705 N.W. 113TH LANE  
ALACHUA, FL 32615

## Current Mailing Address:

408 W UNIVERSITY AVE.  
STE. 303  
GAINESVILLE, FL 32601

## New Mailing Address:

323 TURKEY CREEK  
ALACHUA, FL 32615

FEI Number: 59-3627192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OWENS, JACQUELINE  
408 W UNIVERSITY AVE.  
STE. 303  
GAINESVILLE, FL 32601 US

## Name and Address of New Registered Agent:

OWENS, JACQUELINE  
6705 N.W. 113TH LANE  
323 TURKEY CREEK  
ALACHUA, FL 32615 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:

02/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: OWENS, JACQUELINE  
Address: 408 W UNIVERSITY AVE., STE. 303  
City-St-Zip: GAINESVILLE, FL 32601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change ( ) Addition  
Name: OWENS, JACQUELINE  
Address: 323 TURKEY CREEK  
City-St-Zip: ALACHUA, FL 32615

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELINE OWENS

MS.

02/12/2009

Electronic Signature of Signing Officer or Director

Date