


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90022 019 ***150.00

DOCUMENT # P01000022549 1. Entity Name FJF PALM CITY, INC.					
Principal Place of Business 3662 SW 30TH AVENUE SUITE #1 PALM CITY, FL 34990			Mailing Address 3662 SW 30TH AVENUE SUITE #1 PALM CITY, FL 34990		
2. Principal Place of Business - No P.O. Box # 498 Mariner Drive Suite, Apt. #, etc.		3. Mailing Address 498 Mariner Drive Suite, Apt. #, etc.			
City & State Jupiter FL Zip 33477 Country US		City & State Jupiter FL Zip 33477 Country US		4. FEI Number 68-0791810	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MOFSEN, HOWARD J 9728 W SAMPLE RD CORAL SPRINGS, FL 33065			7. Name and Address of New Registered Agent Name Domenica Flora Street Address (P.O. Box Number is Not Acceptable) 498 Mariner Drive City Jupiter FL Zip Code 33477		
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 <u><i>Domenica M. Flora</i></u> DATE <u>2/1/2008</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FLORA, FRANK 19040 SE REACH ISLAND LANE JUPITER, FL 33458	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FLORA, MIKE 498 MARINER DR JUPITER, FL 33477	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST Domenica M. Flora 498 Mariner Drive Jupiter, FL 33477	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLORA, ASHLEY 19040 SE REACH ISLAND LANE JUPITER, FL 33458	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Domenica M. Flora</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>2/1/08 (561) 575-9962</u> <small>Date Daytime Phone #</small>		