## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000009387

Entity Name: JOEDON ENTERPRISES, INC.

FILED Apr 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1423 CAMPBELL STREET 2024 FOREST GLEN CT ORLANDO, FL 32806 TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 560471 2024 FOREST GLEN CT ORLANDO, FL 32856 TALLAHASSEE, FL 32303 US

FEI Number: 01-0589709 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CHIARO, JOSEPH J
1423 CAMPBELL STREET
2024 FOREST GLEN CT
ORLANDO, FL 32806 US
TALLAHASSEE, FL 32303 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: 04/08/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 PD
 ( ) Delete

 Name:
 CHIARO, JOSEPH J

 Address:
 POST OFFICE BOX 560471

 City-St-Zip:
 ORLANDO, FL 32856

 Title:
 VD
 ( ) Delete

 Name:
 CHIARO, DONNA B

 Address:
 POST OFFICE BOX 560471

 City-St-Zip:
 ORLANDO, FL 32856

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHIARO, JOSEPH J
Address: 2024 FOREST GLEN CT
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VD (X) Change () Addition

 Name:
 CHIARO, DONNA B

 Address:
 2024 FOREST GLEN CT

 City-St-Zip:
 TALLAHASSEE, FL 32303 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH J CHIARO PD 04/08/2006