

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029846

Entity Name: JAMISON-HINSDALE GC, INC.

FILED  
Apr 30, 2005  
Secretary of State

## Current Principal Place of Business:

26947 MORTON GROVE DR  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 39  
BONITA SPRINGS, FL 34133

## New Mailing Address:

FEI Number: 03-0406773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HINSDALE, JULIE H  
26947 MORTON GROVE DR  
BONITA SPRINGS, FL 34135 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JAMISON, CHARLES  
Address: 800 OLD ROSWELL LAKES PKWY., #320  
City-St-Zip: ROSWELL, GA 30076

Title: V ( ) Delete  
Name: HINSDALE, JULIE H  
Address: 26947 MORTON GROVE DR  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: ST ( ) Delete  
Name: MORSE, BRIAN M  
Address: 26947 MORTON GROVE DR  
City-St-Zip: BONITA SPRINGS, FL 34135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: SPENCER, KRISTI A  
Address: 23116 MARSH LANDING BLVD.  
City-St-Zip: ESTERO, FL 33928

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JULIE H. HINSDALE

V

04/30/2005

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

\_\_\_\_\_  
Date