

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000079183

1. Entity Name
JENNIE HALLORAN, INC.



Principal Place of Business
**3956 TOWN CENTER BLVD.
STE 130
ORLANDO, FL 32837**

Mailing Address
**3956 TOWN CENTER BLVD.
STE 130
ORLANDO, FL 32837**



01292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **81-0563275** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HOLMES, JOHN V.A.
811 N. MAGNOLIA AVENUE
ORLANDO, FL 32803**

**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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HALLORAN, JENNIE
STREET ADDRESS 3956 TOWN CENTER BLVD.
CITY-ST-ZIP ORLANDO, FL 32837

TITLE STD
NAME WILLIAMS, BEN
STREET ADDRESS 3956 TOWN CENTER BLVD.
CITY-ST-ZIP ORLANDO, FL 32837

TITLE VD
NAME CHURCH, LARRY
STREET ADDRESS 3956 TOWN CENTER BLVD.
CITY-ST-ZIP ORLANDO, FL 32837

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

U000003210267
02/02/05-80072-020 150.00

**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 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: *LARRY CHURCH* **LARRY CHURCH**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/05 **1/28/05** *407.888.9000* **407.888.9000**

Date

Daytime Phone #