

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047112

FILED  
May 14, 2008  
Secretary of State

Entity Name: THE JOEL GROUP CORPORATION

**Current Principal Place of Business:**

2708 ALTERNATE 19 NORTH  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

2706 ALTERNATE 19 NORTH  
PALM HARBOR, FL 34683

**Current Mailing Address:**

PO BOX 2152  
PALM HARBOR, FL 34682

**New Mailing Address:**

FEI Number: 45-0511839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURKE, CHRISTOPHER J  
375 WINDRUSH LOOP  
TARPON SPRINGS, FL 34689 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: O ( ) Delete  
Name: BURKE, CHRISTOPHER OWNER  
Address: 375 WINDRUSH LOOP  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: CHRIS BURKE

PRES

05/14/2008

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

\_\_\_\_\_ Date