

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 08, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000047941	
1. Entity Name JOLLY ENTERPRISES, INC.	
Principal Place of Business 6035 FORT CAROLINE RD STE 14 JACKSONVILLE, FL 32277	Mailing Address 3111 SNAPPER STREET JACKSONVILLE, FL 32277



DO NOT WRITE IN THIS SPACE

08052005 No Chg-P CR2E034 (10/03)

4. FEI Number 55-0831992	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

JOLLY, PAULIN S
3111 SNAPPER STREET
JACKSONVILLE, FL 32246

**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 title if applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

000000375801
08/08/05-80002-001 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	JOLLY, PAULIN S
STREET ADDRESS	3111 SNAPPER ST
CITY - ST - ZIP	JACKSONVILLE, FL 32246
TITLE	T
NAME	JOLLY, ZILIANE
STREET ADDRESS	3111 SNAPPER ST
CITY - ST - ZIP	JACKSONVILLE, FL 32246
TITLE	S
NAME	DELANO, CARLOS
STREET ADDRESS	7156 PRELLIE ST
CITY - ST - ZIP	JACKSONVILLE, FL 32210
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08 01 2005

Date

Daytime Phone #