## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000083867

Entity Name: JGUN RETIREMENT SERVICE, INC.

FILED Jun 15, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

901 SW MARTIN DOWNS BLVD STE 206 850 NW FEDERAL HWY PALM CITY, FL 34990

104

STUART, FL 34994

**Current Mailing Address: New Mailing Address:** 

901 SW MARTIN DOWNS BLVD STE 206 850 NW FEDERAL HWY PALM CITY, FL 34990 104

STUART, FL 34994

FEI Number: 20-0164777 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GUNTKOWSKI, JOHN A GUNTKOWSKI, JOHN A 901 SW MARTIN DOWNS BLVD STE 206 PALM CITY, FL 34990 US 850 NW FEDERAL HWY 104

PALM CITY, FL 34994 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: 06/15/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

**PVST** ( ) Delete Title: (X) Change ( ) Addition

Title: GUNTKOWSKI, JOHN A GUNTKOWSKI, JOHN A Name: Name:

901 SW MARTIN DOWNS BLVD STE 206 Address: 850 NW FEDERAL HWY Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: STUART, FL 34994

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: JOHN A. GUNTKOWSKI **PRES** 06/15/2005