

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000102635

1. Entity Name
JEPA MARKETING, INC.



Principal Place of Business
**1400 TARPON WOODS BLVD F-4
PALM HARBOR, FL 34685**

Mailing Address
**1400 TARPON WOODS BLVD F-4
PALM HARBOR, FL 34685**

DO NOT WRITE IN THIS SPACE



03292006 No Chg-P CR2E034 (11/05)

4. FEI Number **32-0092233** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DAFONTE, RICHARD J ESQ
1000 BELCHER ROAD SOUTH SUITE 2
LARGO, FL 33771**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**000000489941
04/18/06-80035-021 150.00**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **DAFONTE, RICHARD J**
STREET ADDRESS **1000 BELCHER ROAD SOUTH SUITE 2**
CITY-ST-ZIP **LARGO, FL 33771**

TITLE **PT**
NAME **HICE, MARY JEAN**
STREET ADDRESS **1400 TARPON WOODS BLVD. #F4**
CITY-ST-ZIP **PALM HARBOR, FL 34685**

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mary Jean Hice **MARY JEAN HICE** 3/31/03 727-785-7354
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #