## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106687

Entity Name: J. POINDEXTER & ASSOCIATES, INC.

FILED Apr 28, 2008 Secretary of State

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

7119 39TH LANE EAST 5342 CLARK ROAD SARASOTA, FL 34243

SUITE 191

SARASOTA, FL 34233 US

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

5342 CLARK ROAD 7119 39TH LANE EAST SARASOTA, FL 34243

SUITE 191

SARASOTA, FL 34233 US

FEI Number: 20-0249226 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:

POINDEXTER, JODEAN POINDEXTER, JODEAN 7119 39TH LANE EAST 5342 CLARK ROAD SARASOTA, FL 34243 US SUITE 191

SARASOTA, FL 34233 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: JODEAN POINDEXTER 04/28/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: PRFS ( ) Delete Title: PRFS (X) Change ( ) Addition POINDEXTER, JODEAN Name: Name: POINDEXTER, JODEAN 7119 39TH LANE EAST 5342 CLARK ROAD, SUITE 191 Address: Address: City-St-Zip: SARASOTA, FL 34243 City-St-Zip: SARASOTA, FL 34233 US

( ) Delete Title: VΡ Title: VΡ (X) Change ( ) Addition

DYER, NICHOLE Name: Name: DYER, NICHOLE

7119 39TH LANE EAST 5342 CLARK ROAD SUITE 191 Address: Address: SARASOTA, FL 34243 SARASOTA, FL 34233 US City-St-Zip: 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: JODEAN POINDEXTER **PRES** 04/28/2008