

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003897

FILED
Apr 14, 2009
Secretary of State

Entity Name: J & J VELLA ENTERPRISES, INC.

Current Principal Place of Business:

5488 TALISMANN TERRACE
NORTH PORT, FL 34286

New Principal Place of Business:

5488 TALISMAN TERRACE
NORTH PORT, FL 34286

Current Mailing Address:

5488 TALISMANN TERRACE
NORTH PORT, FL 34286

New Mailing Address:

5488 TALISMAN TERRACE
NORTH PORT, FL 34286

FEI Number: 20-0543363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELLA, JOHN
5488 TALISMANN TERRACE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

VELLA, JOHN
5488 TALISMAN TERRACE
NORTH PORT, FL 34286 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: _____

Electronic Signature of Registered Agent

04/14/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VELLA, JOHN
Address: 5488 TALISMANN TERRACE
City-St-Zip: NORTH PORT, FL 34286

Title: VP () Delete
Name: VELLA, JANICE L
Address: 5488 TALISMANN TERRACE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VELLA, JOHN
Address: 5488 TALISMAN TERRACE
City-St-Zip: NORTH PORT, FL 34286

Title: VP (X) Change () Addition
Name: VELLA, JANICE L
Address: 5488 TALISMAN TERRACE
City-St-Zip: NORTH PORT, FL 34286

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: JANICE L VELLA

Electronic Signature of Signing Officer or Director

VP

04/14/2009

Date