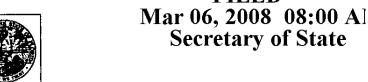
2008 FOR PROFIT CORPORATION ANNUAL REPORT

1. C



OCUMENT # P04000068425	
Entity Name OLLECTIONS & TREASURERS BY JOJO, INC	
	1

Principal Place of Business

Mailing Address

5379 DOMINICA CIRCLE SARASOTA, FL 34233

5379 DOMINICA CIRCLE SARASOTA, FL 34233



CR2E034 /11/05\

FILED

DO NOT	WRITE	IN THIS	SPACE
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52002000 115 5.ng 1	2/122001 (7.11.00)		
4. FEI Number		Applied For	
20-1047215		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional	

6.	Name	and Address	of Current	Registered	Agent

MOHR, JO ANN 5379 DOMINICA CIRCLE SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

		<u> </u>			
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	fapplicable. (NOTE: Registered A	gent agnaturi	required when reinstitting)	DATE
	E NOW!!! FEE IS \$150.00 by 1, 2008 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOHR, JO ANN 5379 DOMINICA CIRCLE SARASOTA, FL 34233				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAM, MOHR 5379 DOMINICA CIR SARASOTA, FL 34233				U00000848867 03/20/08-80034-024 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
11TLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
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.					

Jo ANN MOHR

2-29-08