

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90087 010 ***150.00

DOCUMENT # P04000078833

1. Entity Name

J AND C PROPERTY MANAGEMENT TEAM, INC.



Principal Place of Business
1201 SE PARKVIEW PL.
STUART, FL 34994

Mailing Address
14 WOODLAND ST.
BLUE POINT, NY 11715

50010957



2. Principal Place of Business

PO Box 8116
Suite, Apt., #, etc.

3. Mailing Address

PO Box 8116
Suite, Apt., #, etc.

City & State

Port St Lucie
Zip *34985* Country *USA*

City & State

Port Saint Lucie
Zip *34985* Country *St. Lucie*

4. FEI Number

550868962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIARRATANO, JOHN
1201 SE PARKVIEW PL.
STUART, FL 34994

7. Name and Address of New Registered Agent

Name *JOHN J GIARRATANO*

Street Address (P.O. Box Number is Not Acceptable)

2198 DOLPHIN RD

City *Port St Lucie* FL Zip Code *34952*

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

John J Giarratano

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-24-05

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P/D ☐ Delete
NAME GIARRATANO, JOHN
STREET ADDRESS *1201 SE PARKVIEW PL. PO Box 8116*
CITY - ST - ZIP *STUART, FL 34994 Port St Lucie FL 34985*

TITLE S ☐ Delete
NAME GIARRATANO, JOHN
STREET ADDRESS *1201 SE PARKVIEW PL. PO Box 8116*
CITY - ST - ZIP *STUART, FL 34994 Port St Lucie FL 34985*

TITLE VP/D ☐ Delete
NAME PITTINARO, CARMEN
STREET ADDRESS 14 WOODLAND ST.
CITY - ST - ZIP BLUE POINT, NY 11715

TITLE T ☐ Delete
NAME PITTINARO, CARMEN
STREET ADDRESS 14 WOODLAND ST.
CITY - ST - ZIP BLUE POINT, NY 11715

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

John J Giarratano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-24-05