


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000133000 1. Entity Name MJL INVESTMENTS, INC.	
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Principal Place of Business 601 N FERNCREEK AVE. 200 ORLANDO, FL 32803	Mailing Address 601 N FERNCREEK AVE. 200 ORLANDO, FL 32803
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01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1648916	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WHITLEY, LARRY V 601 N FERNCREEK AVE 200 ORLANDO, FL 32803
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**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

UD00000379484
01/10/06-80022-023 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JONES, MARK 601 N FERNCREEK AVE, SUITE 200 ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOOD, JODIE L 601 N FERNCREEK AVE, SUITE 200 ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRS WHITLEY, LARRY V 601 N. FERNCREEK AVE, SUITE 200 ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry V Whitley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-29-05 407-894-563
Date Daytime Phone #