

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172715

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: CJ ENTERPRISES OF DESTIN, INC.

## Current Principal Place of Business:

210 HWY 98 EAST  
DESTIN, FL 32541

## New Principal Place of Business:

210 HARBOR BLVD  
DESTIN, FL 32541

## Current Mailing Address:

PO BOX 835  
DESTIN, FL 32540

## New Mailing Address:

FEI Number: 41-2162638      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REESE, JAMI M  
3830 INDIAN TRAIL  
DESTIN, FL 32541      US

## Name and Address of New Registered Agent:

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

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: REESE, JAMI M  
Address: 3830 INDIAN TRAIL  
City-St-Zip: DESTIN, FL 32541

Title: V ( ) Delete  
Name: KENNEDY, CATHY A  
Address: 4080 DANCING CLOUD CT #238  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMI M REESE

P

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date