

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000031159

1. Entity Name
ST. JOHNS PROMOTIONAL PRODUCTS, INC.



Principal Place of Business
1956 BIRCH RUN E
ORANGE PARK, FL 32073

Mailing Address
1956 BIRCH RUN E
ORANGE PARK, FL 32073

FILED
Aug 13, 2008 08:00 AM
Secretary of State



08072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4415231

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SABATIER, NAOMI
1956 BIRCH RUN E
ORANGE PARK, FL 32073

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SABATIER, NAOMI
STREET ADDRESS	1956 BIRCH RUN E
CITY-ST-ZIP	ORANGE PARK, FL 32073
TITLE	VP
NAME	HARTLEY, TERRY JAN
STREET ADDRESS	2487 CYPRESS SPRINGS ROAD
CITY-ST-ZIP	ORANGE PARK, FL 32073
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000957619
08/13/08-80002-016 150.00

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

SIGNATURE:

Naomi R. Sabatier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-11-08

904.272.338

Date

Daytime Phone #