

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000056588

**FILED**  
**Feb 12, 2011**  
**Secretary of State**

**Entity Name:** NORMAN JEUNE CONTRACTING, INC.

**Current Principal Place of Business:**

5436 WATERSIDE DRIVE  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

5436 WATERSIDE DRIVE  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

**FEI Number:** 20-3673679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JEUNE, NORMAN JR.  
5436 WATERSIDE DRIVE  
JACKSONVILLE, FL 32210 US

**Name and Address of New Registered Agent:**

JEUNE, VICTORIA  
5436 WATERSIDE DRIVE  
JACKSONVILLE, FL 32210 US

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: VICTORIA JEUNE

02/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JEUNE, NORMAN JR.  
Address: 5436 WATERSIDE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: VP  
Name: JEUNE, VICTORIA  
Address: 5436 WATERSIDE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210 US

I hereby 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 all other like empowered.

SIGNATURE: NORMAN JEUNE JR.

P

02/12/2011

Electronic Signature of Signing Officer or Director

Date