2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000144339

Entity Name: CJ'S BAKERY & SWEETS INC.

FILED Apr 29, 2008 Secretary of State

5120 SE 145TH STREET 9317 SE MARICAMP RD US OCALA, FL 34472 SUMMERFIELD, FL 34491

Current Mailing Address: New Mailing Address:

5120 SE 145TH STREET 9317 SE MARICAMP RD SUMMERFIELD, FL 34491 US OCALA, FL 34472

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

JOHNSON, CYNTHIA JOHNSON, CYNTHIA L VICE PR 5120 SE 145TH STREET 5120 SE 145TH STREET SUMMERFIELD, FL 34491 US SUMMERFIELD, FL 34491 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: CYNTHIA JOHNSON 04/29/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: (X) Change () Addition JOHNSON, JEFFERY JOHNSON, JEFFERY L Name: Name: 5120 SE 145TH STREET **5120 SE 145TH STREET** Address: Address:

City-St-Zip: SUMMERFIELD, FL 34491 US City-St-Zip: SUMMERFIELD, FL 34491 US

Title: VP/D Title: () Delete () Change () Addition Name: JOHNSON, CYNTHIA Name: **5120 SE 145TH STREET** Address: Address: SUMMERFIELD, FL 34491 US City-St-Zip:

Title: Title: T/S () Delete () Change () Addition

JOHNSON, CYNTHIA Name: Name: 5120 SE 145TH STREET Address: Address: City-St-Zip: SUMMERFIELD, FL 34491 US 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: CYNTHIA JOHNSON VP/D 04/29/2008