

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000001616

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: A TOUCH OF ELOQUENCE BY JOY, INC.

**Current Principal Place of Business:**

1600 NE 157TH TERRACE  
NORTH MIAMI BEACH, FL 33165

**New Principal Place of Business:**

17875NW18AVE  
MIAMI GARDEN, FL 33056

**Current Mailing Address:**

1600 NE 157TH TERRACE  
NORTH MIAMI BEACH, FL 33165

**New Mailing Address:**

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

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

NAYLOR, GEORGE  
1600 NE 157TH TERRACE  
NORTH MIAMI BEACH, FL 33165      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:                      JOY-NAYLOR, VERA  
Address:                      1600 NE 157TH TERRACE  
City-St-Zip:                      NORTH MIAMI BEACH, FL 33165

Title:                      V                      ( ) Delete  
Name:                      NAYLOR, GEORGE  
Address:                      1600 NE 157TH TERRACE  
City-St-Zip:                      NORTH MIAMI BEACH, FL 33165

Title:                      T                      ( ) Delete  
Name:                      KIRKLAND, RYAN  
Address:                      1600 NE 157TH TERRACE  
City-St-Zip:                      NORTH MIAMI BEACH, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: GEORGE NAYLOR

V

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date