

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000025305

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: JACK ICE AND JAVA, INC.

**Current Principal Place of Business:**

145 CAPTIVA CT.  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 372801  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

145 CAPTIVA CT.  
MELBOURNE BEACH, FL 32951 US

FEI Number: 26-2304797

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DETTMANN, EDMUND  
145 CAPTIVA CT.  
MELBOURNE BEACH, FL 32951 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: PD ( ) Delete  
Name: DETTMANN, EDMUND  
Address: 145 CAPTIVA CT.  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: V ( ) Delete  
Name: DIGIACOMO, DAMIAN  
Address: 531 PINETREE DRIVE  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: T ( ) Delete  
Name: DIGIACOMO, DEBORAH  
Address: 531 PINETREE DRIVE  
City-St-Zip: INDIALANTIC, FL 32903 US

Title: S ( ) Delete  
Name: DETTMANN, MARYANN  
Address: 145 CAPTIVA CT.  
City-St-Zip: MELBOURNE BEACH, FL 32951 US

**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:

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: EDMUND DETTMANN

PD

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date