

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000056638

FILED  
Jan 03, 2012  
Secretary of State

Entity Name: J&L MANAGEMENT OF NORTH FL, INC.

**Current Principal Place of Business:**

11936 ROLLING RIVER BLVD  
JACKSONVILLE, FL 32219 US

**New Principal Place of Business:**

**Current Mailing Address:**

PMB #118 1038-5 DUNN AVE  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

FEI Number: 27-0473909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LONG, JAMES A PRES  
11936 ROLLING RIVER BLVD  
JACKSONVILLE, FL 32219 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

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: LONG, JAMES  
Address: 11936 ROLLING RIVER BLVD  
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: D  
Name: LONG, JAMES  
Address: 11936 ROLLING RIVER BLVD  
City-St-Zip: JACKSONVILLE, FL 32219 US

Title: D  
Name: FREENEY, LISA  
Address: 9004 10TH AVE  
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: D  
Name: LONG, MAGGIE  
Address: 4020 RANIE RD  
City-St-Zip: JACKSONVILLE, FL 32218 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: JAMES LONG

PVST

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date