

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000053507

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** JAMES - GLOVER ENTERPRISES, INC.

**Current Principal Place of Business:**

13814 NW 11TH ST.  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

**Current Mailing Address:**

2114 N. FLAMINGO RD.  
PEMBROKE PINES, FL 330283501

**New Mailing Address:**

2114 N. FLAMINGO RD. PMB 168  
PEMBROKE PINES, FL 330283501

**FEI Number:** 27-2929193

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GLOVER, CRAIG A  
1402 SW 150TH TERRACE  
DAVIE, FL 33326 US

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

GLOVER, BONNIE J  
13814 NW 11TH STREET  
PEMBROKE PINES, FL 33028 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:** BONNIE J. GLOVER

03/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** GLOVER, CRAIG A  
**Address:** 13814 NW 11TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028 US

**Title:** VP  
**Name:** GLOVER, BONNIE J  
**Address:** 13814 NW 11TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028 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:** BONNIE J. GLOVER

VP

03/17/2011

Electronic Signature of Signing Officer or Director

Date