

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000064625

FILED
Apr 13, 2011
Secretary of State

Entity Name: DINE JAX, INC.

Current Principal Place of Business:

9838 OLD BAYMEADOWS ROAD #281
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9838 OLD BAYMEADOWS ROAD #281
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 27-3152254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDEN, SHERRI
8655 HUNTERS CREEK DRIVE S
JACKSONVILLE, FL 32256 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: VD
Name: PORTER, DEAN
Address: 8655 HUNTERS CREEK DRIVE S
City-St-Zip: JACKSONVILLE, FL 32256

Title: PD
Name: LINDEN, SHERRI
Address: 8655 HUNTERS CREEK DRIVE S
City-St-Zip: JACKSONVILLE, FL 32256

Title: S
Name: WILLARD, REBECCA M
Address: 8655 HUNTERS CREEK DRIVE S
City-St-Zip: JACKSONVILLE, FL 32256

Title: T
Name: GLOVER, GLORIA
Address: 2165 WATERFOOT LANE
City-St-Zip: JACKSONVILLE, FL 32256

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: SHERRI LINDEN

PD

04/13/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date