2005 FOR PROFIT CORPORATION Aฟิที่ปัAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 18, 2005 8:00 am Secretary of State DOCUMENT # P94000080463 1. Entity Name 04-18-2005 90269 025 ***150.00 JDF OF MANATEE, INC. Principal Place of Business Mailing Address P.O. BOX 1520 P.O. BOX 1520 **BRADENTON FL 34206** BRADENTON FL 34206 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0537837 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SVERDLOW, JEFFREY C Street Address (P.O. Box Number is Not Acceptable) 2808 20TH AVE E BRADENTON FL \$4208 City FL 8. 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. I am familiar with, and accept the obligations of register SIGNATURE Signature, typed inted name of registered agent and title if applicable, DATE (NOTE Registered Agent signature required when reinstating) FILE NOW PEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE ☐ Change ▼ Delete ☐ Addition SVERDLOW, ALAN B 601 LONGBOAD CLUB ROAD STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL CITY-ST-7JP CITY-ST-ZIP VPS TITLE ☐ Delete TITLE Þ - Change ☐ Addition SVERDLOW, JEFFREY C NAME NAME STREET ADDRESS 1521 51ST ST., W STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP TITLE ☐ Delete TITLE Change 🔀 Addition V.>----Fredrick L. Serlo STREET ADDRESS STREET ADDRESS 500 Executive Center Dr Apt 4-H CITY-ST-ZIP City-St-7/P <u>West Palm Beach. FL 33401</u> TITLE ☐ Delete TITLE Change X Addition Doris B. Goulette 11613 Baronwood Count NAME NAME STREET ADDRESS STREET ADDRESS Hudson, FL 34667 CITY-ST-7iP CITY-ST-7IP TITLE ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP I hereby certify that the information supplied with his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an applicable. 12. I hereby certify that the information 2/23/05

FILED

941-747-1501

Daytime Phone #