

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000007707

FILED  
Apr 11, 2005  
Secretary of State

Entity Name: JONALISA, INC.

**Current Principal Place of Business:**

8309 N. THATCHER AVE  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 271429  
TAMPA, FL 336881429

**New Mailing Address:**

FEI Number: 59-3295520      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PLASTER, JOAN V  
11719 PHOENIX CIR.  
TAMPA, FL 33618      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: PS ( ) Delete  
Name: PLASTER, JOAN V  
Address: 11719 PHOENIX CIR.  
City-St-Zip: TAMPA, FL 33618

Title: VPT ( ) Delete  
Name: PLASTER, WAYNE  
Address: 11719 PHOENIX CIR.  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: PLASTER, TIMOTHY  
Address: 11719 PHOENIX CIR  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: BAKER, KRISTEN P  
Address: 11719 PHOENIX CIR  
City-St-Zip: TAMPA, FL 33618

**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 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 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: JOAN V. PLASTER

PS

04/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date