


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90117 001 ***480.75

DOCUMENT # P97000045645

1. Entity Name
PROPERTIES BY J.J.J. INC.



Principal Place of Business Mailing Address
POB 5605 SPRING HILL FL 34611 **POB 5605 SPRING HILL FL 34611**



2. Principal Place of Business - No P.O. Box # **PROPERTIES BY J.J.J. INC.**
 Suite, Apt. #, etc. **1579-15339 CORTEZ BLVD.**

3. Mailing Address **P.O. Box 5605**
 Suite, Apt. #, etc. **SPRING HILL, FL**

City & State **BROOKSVILLE FL** City & State **SPRING HILL, FL**

Zip **34613** Country **USA** Zip **34606** Country **USA**

1st MOORE CR2E034 (10/07)

4. FEI Number **59-3446213** Applied For Not Applicable

6. Name and Address of Current Registered Agent

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

JOSEPH, JAMES J JR
DBA PROP BY JJJ INC. *delete*
2454 LANDOVER BLVD
SPRING HILL FL 34608-3331

7. Name and Address of New Registered Agent

Name **JAMES JOSEPH SA. BY ANTOINETTE PIASECKI GUARDIAN**
 Street Address (P.O. Box Number is Not Acceptable) **8089 PAGODA DR.**
DBA PROPERTIES BY JJJ INC.
 City **SPRING HILL, FL** Zip Code **34606**

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, registered agent.

SIGNATURE *James Joseph Jr. By Antoinette Piasecki Guardian* DATE **4-11-08**

Signature, typed or printed name of registered agent, if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Delete |
|-------|--------------------|--------------------|----------------------------|-------------------------------------|
| P | JOSEPH, JAMES J JR | 2454 LANDOVER BLVD | SPRING HILL, FL 34608-3331 | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|-------|------------------|-----------------|-----------------------|---|
| | JAMES JOSEPH SA. | 8089 PAGODA DR. | SPRING HILL, FL 34606 | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 or 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 address, with all other like empowered.

SIGNATURE: *James Joseph Jr. By Antoinette Piasecki Guardian* DATE **4-11-08** DAYTIME PHONE **352-683-2140**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

ATTACHMENT 66007733

997000045645

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT
IN AND FOR HERNANDO COUNTY, FLORIDA

PROBATE DIVISION

IN RE: GUARDIANSHIP OF

CASE NO. H-27-CP-2006 1245 JWS

JAMES JOSEPH, SR.

Incapacitated.

**LETTERS OF PLENARY GUARDIANSHIP
OF PERSON AND PROPERTY**

TO WHOM IT MAY CONCERN:

WHEREAS ANTOINETTE PIASECKI has been appointed plenary guardian of the person and property of JAMES JOSEPH, SR. (the Ward), and has taken the prescribed oath and performed all other acts prerequisite to issuance of plenary letters of guardianship of the person and property of the Ward,

NOW, THEREFORE, I, the undersigned circuit Judge, declare ANTOINETTE PIASECKI duly qualified under the laws of the State of Florida, to act as plenary guardian of the person and property of JAMES JOSEPH, SR., with full power to have the care, custody and control of the Ward, to exercise all delegable legal rights and powers of the Ward, to administer the property of the Ward according to law, and to take possession of and to hold, for the benefit of the Ward, all property of the Ward, and all of the rents, income, issues and profits from it AND have the authorization to make health care decisions on behalf of JAMES JOSEPH, SR., including, but not limited to, admission to the hospital, nursing home, and permission to perform medical procedures, including surgery. The Guardian shall also have full access to all contents held in a safe deposit box.

The guardian shall not exercise any authority over any health care surrogate appointed by any valid advanced directive executed by the Ward pursuant to Chapter 765, Florida Statutes, until further order of this Court.

ORDERED on this 23 day of Aug, 2006.

Jack Springstead
CIRCUIT JUDGE

I hereby certify that the foregoing is a true and correct copy of the original and further certify that these letters are in full force and effect.
Karen Nicolai, Clerk Circuit Court Hernando County, Florida.

By: *Marcia E. Manigault*
Aug 23, 2006

