


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 04, 2005 8:00 am**  
**Secretary of State**

04-04-2005 90080 027 \*\*\*150.00

<b>DOCUMENT # P98000066695</b>	
1. Entity Name <b>JLK PROMOTIONS, INC.</b>	

Principal Place of Business <b>10555 WOODCHASE CIR. ORLANDO FL 32836</b>	Mailing Address <b>C/O RONALD E. DURBIN 10555 WOODCHASE CIRCLE ORLANDO FL 32836</b>
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1st MOORE CR2E034 (10/04)

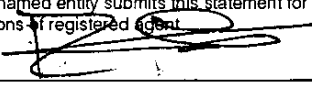
2. Principal Place of Business <b>1610 Drummond Ave.</b> Suite, Apt. #, etc.	3. Mailing Address <b>C/O Ronald E. Durbin</b> Suite, Apt. #, etc. <b>1610 Drummond Ave.</b>
City & State <b>Panama City, FL</b>	City & State <b>Panama City FL</b>
Zip <b>32401</b>	Zip <b>32401</b>
Country	Country

4. FEI Number <b>59-3525885</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>DURBIN, RONALD E 10555 WOODCHASE CIR ORLANDO FL 32836</b>
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7. Name and Address of New Registered Agent Name <b>Durbin, Ronald E.</b> Street Address (P.O. Box Number is Not Acceptable) <b>1610 Drummond Ave.</b> City <b>Panama City</b> FL Zip Code <b>32401</b>
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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:  DATE: **3/29/05**

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 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	<b>D NINASSI, JULIE L 5419 HOPETOWN LANE PANAMA CITY FL 32408</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DP DURBIN, RONALD E 10555 WOODCHASE CIR ORLANDO FL 32836</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DST- DURBIN, KAREN L 10555 WOODCHASE CIR ORLANDO FL 32836</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DP Durbin, Ronald E 1610 Drummond Ave Panama City, FL 32401</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DST- Durbin, Karen L. 1610 Drummond Ave Panama City, FL 32401</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this 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 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:  **Karen L. Durbin** 3/29/05 850-913-0621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #