## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 03, 2005 08:00 AM **Secretary of State** DOCUMENT # P98000074672 1. Entity Name J & J PROPERTIES OF VERO, INC. Mailing Address Principal Place of Business 550 2ND STREET SW 550 2ND STREET SW VERO BEACH, FL 32962 VERO BEACH, FL 32962 US 01212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4 FEI Number Not Applicable 59-3530146 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MCHUGH, JOHN J JR. DO NOT WRITE 333 17TH STREET SUITE U IN THIS SPACE VERO BEACH, FL 32960 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 U000000213458 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE Simmer of copplaints of copyrights and co LICARDI, JOHN NAME STREET ADDRESS 550 2ND ST SW CITY-ST-ZIP VERO BEACH, FL 32962 TITLE e and a second of the second o KRAUSS, JOSEPH A III NAME STREET ADDRESS 550 2ND ST SW ويوسي وينهشنان والمستواد CITY-ST-ZIP VERO BEACH, FL 32962 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**