## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000044943

Address:

City-St-Zip:

2257 WALKERS GLEN LANE

JACKSONVILLE, FL 32246

Entity Name: A & F ENTERPRISES OF JACKSONVILLE. INC

FILED Feb 19, 2009 Secretary of State

Entity Nan	ne: A&FEN	TERPRISES OF JACKSONV	ILLE, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
9501 ARLINGTON EXPRESSWAY #745 JACKSONVILLE, FL 32225				8380 BAYMEADOWS RD #4 JACKSONVILLE, FL 32256			
Current Mailing Address:				New Mailing Address:			
9501 ARLINGTON EXPRESSWAY #745 JACKSONVILLE, FL 32225				8380 BAYMEADOWS RD #4 JACKSONVILLE, FL 32256			
FEI Number:	59-3586106	FEI Number Applied For ( )	FEI Number Not A	oplicable (	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ROEBER, FRANK R 9501 ARLINGTON EXPRESSWAY #745 JACKSONVILLE, FL 32225 US				ROEBER, FRANK R 8380 BAYMEADOWS RD #4 JACKSONVILLE, FL 32256 US			
The above in the State		submits this statement for the	purpose of changing	g its regist	ered office or registered agent, or bo	oth,	
SIGNATURE:				02/19/2009			
	Electror	nic Signature of Registered Ag	jent		Date	_	
Election Can	npaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( ROEBER, ANN 14180 TOMAS JACKSONVILL	POINT LANE	Title: Name: Address: City-St-Zip	ı:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPST ( ROEBER, FRA 14180 TOMAS JACKSONVILL	POINT LANE	Title: Name: Address: City-St-Zip	14180	(X) Change ( ) Addition R, FRANK OMAS POINT LANE DNVILLE, FL 32225		
Title: Name:	ST (	) Delete	Title: Name:		( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: ANN ROEBER PRES 02/19/2009