

2009 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

ATX1

DOCUMENT #	P99000109587
1. Entity Name	
Jo-Ann of Broward County, Florida, Inc.	

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 7389 Blue Star Memorial Highway Suite, Apt. #, etc.		3. Mailing Address 7389 Blue Star Memorial Highway Suite, Apt. #, etc.	
City & State Chattahoochee, FL		City & State Chattahoochee, Florida	
Zip 32324	Country USA	Zip 32324	Country USA

**FILED**  
**09 FEB -9 PM 12:13**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

<b>DO NOT WRITE IN THIS SPACE</b>	7. Name and Address of Current Registered Agent	
	Name JOSEPHUS EGGELETON, SR.	
	Street Address (P.O. Box Number is Not Acceptable) 7389 Blue Star Memorial Highway	
	City Chattahoochee	Zip Code 32324

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 Josephus Eggelletion Josephus Eggelletion, Sr. 1/30/2009  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/CEO/Chair-Board of Directors Josephus Eggelletion, Sr. 7389 Blue Star Highway Chattahoochee, Florida 32324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800143177988 01/09/09--01047--009 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Corporate Secretary/Treasurer/Director Ann Eggelletion 7389 Blue Star Highway Chattahoochee, Florida 32324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Advisor/Consultant Clifton H. Rodriquez, MPA, CPA, CIA 3146 NW 68th Street, Ste. No.1 Fort Lauderdale, Florida 33309-1206	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Josephus Eggelletion Josephus Eggelletion, Sr., CEO/Dir. 1/30/2009 (850)856-5975  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #