2010

FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)					FILED		
DOCUMENT # P99000109587					SA 15 Experience Mil produc	1.mm·	
1. Entity Name					10 FEB -2 AM 10: 06		
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Jo-Ann of Broward County, Florida, Inc.				<u> </u>	SECRETARY OF TALL ABASSET	STATE resuma	
					PAGE PARAMET	. 1 0164036	
DON	OI WKII	re in this s	PA	CE.			
2. Dringing Diago of Business 2. Mailing A			e kie kil jakie kiljalijalijajaj 1999		2001678263	12.	
2. Principal Place of Business 7389 Blue Star Memorial Highway		3. Mailing Address 7389 Blue Star Memorial Highway			0270270001040007*** \$150.00		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State	City & State		4. FEI Number Applied For		
Chattachoochee, FL		1 *	Chattachoochee, Florida		59-3614966	Not Applicable	
Zip	Country	Zip		ountry	5. Certificate of Status Desired	\$8.75 Additional	
<u>32324</u>	USA	32324	USA	: <b>-</b> N	1	Fee Required	
				Name	ne and Address of Current Reg	istered Agent	
DO NOT WIDITE JOSEPHUS				JOSEPHUS E	EGGELLETION, SR.		
医性部胚层 医阿里萨氏性 化自动电子 医大手上耳 医克里氏 电电话 医大手性 医气压性 化氯化 医毛虫 医电影电影				Street Address (P.O. Box Number is Not Acceptable) 7389 Blue Star Memorial Highway			
	n this s	PACE		7000 2100 010	ar Memorial Figure 4		
				City		Zip Code	
				City Chattachooch	nee FL	32324	
8. The above named	entity submits this	s statement for the purpos	se of cr	nanging its regis	stered office or registered agent,	or both, in the	
1)		and accept the obligations					
SIGNATURE MED	hu rggellel	ne of registered agent and title if a		Josephus Egge	elletion, Sr. tered Agent signature required when reinsta	1/25/2010 ating) DATE	
	- May 1 Fee is \$1		аррисавие	: (NOTE. Regist	tered Agent signature required when remista	iding) DATE	
After M	ay 1, Fee is \$550.	00			9. Election Campaign Financing	\$5.00 May Be	
Amend Make Check Payable	ded UBR is \$61.2 e to Florida Deca				Trust Fund Contribution.	Added to Fees	
10.	OFFIÇERS	S AND DIRECTORS	11.				
TITLE NAME	President/CEO/0   Josephus Eggell	Chair-Board of Directors		TLE IME			
STREET ADDRESS	7389 Blue Star F			REET ADDRESS	S		
CITY-ST-ZIP	Chattachoochee	, Florida 32324		TY-ST-ZIP			
TITLE NAME	Ann Eggelletion	etary/Treasurer/Director		TLE VME			
STREET ADDRESS	7389 Blue Star F	Highway	2727.727.73	REET ADDRESS	8		
CITY-ST-ZIP TITLE	Chattachoochee Board Advisor/B	usiness Consultant		TY-ST-ZIP TLE			
NAME	Clifton H. Rodriq	juez, MPA, CPA, CIA	2000	ME			
STREET ADDRESS CITY-ST-ZIP	3146 NW 68th S	Street, Ste. No.1 , Florida 33309-1206	1 1 1 1	REET ADDRESS TY-ST-ZIP	° DO NOT V	NRITE	
TITLE	T OIT Ladderdale,	, 1 lolida 00000-1200		rle .			
NAME				ME	IN THIS S	FAUE	
STREET ADDRESS CITY-ST-ZIP			1. 1	REET ADDRESS TY-ST-ZIP			
TITLE			TI	ree			
NAME STREET ADDRESS	1			ME REET ADDRESS	s l	deelsk riids	
CITY-ST-ZIP			Cr	TY-ST-ZIP			
TITLE NAME				TLE IME			
STREET ADDRESS			ST	REET ADDRESS	<b>s</b>		
CITY-ST-ZIP  12 I hereby certify that t	he information even	lied with this filing does not a		TY-ST-ZIP	stated in Section 119 07(3\6) Elected	Statutes I further	
					stated in Section 119.07(3)(i), Florida and that my signature shall have the		
as if made under oat	th; that I am an office	er or director of the corporation	on or the	receiver or trust	tee empowered to execute this report	as required by	
Unapter 607, Florida	Statutes; and that n	my name appears in Block 10	or on a	ın attachment wit	th an address, with all other like empo	wered.	
I Ara	Mh. a form	alloTime -		0 0555	4 14 14 14 14 14	(050)050 5055	
SIGNATURE: SIGNA	TURE AND TYPE	DOR PRINTED NAME OF SI	gelletic	on, Sr., CEO/Dir	r. 1/25/2010 RECTOR Date	(850)856-5975 Daytime Phone #	
PIGINA	HONE AND I ME	ON THUSTED NAME OF SI	GIAIIAG	OF FIGURE OR DE	Date	Daytime i none #	