

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90029 016 ***150.00

DOCUMENT # P99000110534

1. Entity Name
JENNIFER REPORTING, INC.



Principal Place of Business
**1844 NE 26TH AVE
FT LAUDERDALE, FL 33305**

Mailing Address
**1844 NE 26TH AVE
FT LAUDERDALE, FL 33305**



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0971628

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WOODMAN, JENNIFER L
1844 NE 26TH AVE
FT LAUDERDALE, FL 33305**

**DO NOT WRITE
IN THIS SPACE**

see attached documents

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

Jennifer Lee McCausland (married 7/10/04) 3/05

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WOODMAN, JENNIFER
STREET ADDRESS	1844 NE 26 AVE
CITY-ST-ZIP	FT LAUD, FL 33305
TITLE	P
NAME	WOODMAN, JENNIFER
STREET ADDRESS	1844 NE 26TH AVENUE
CITY-ST-ZIP	FORT LAUDERDALE, FL
TITLE	Jennifer McCausland
NAME	1844 NE 26 Ave
STREET ADDRESS	FT. LAUDERDALE, FL 33305
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Jennifer Lee McCausland

McCausland 3/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Q54-567-3456

ATTACHMENT

Department of Health • Vital Statistics
STATE OF FLORIDA

MARRIAGE RECORD

TYPE IN UPPER CASE
USE BLACK INK

This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

A0003735

(STATE FILE NUMBER)

#P99000110537

DATE RETURNED:

AUG 03 2004

RECORDED: BOOK

349

PAGE

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HOWARD C. FORMAN, CLERK OF COURT

BY *ER*, DEPUTY CLERK

MT-CE-04-002109
(APPLICATION NUMBER)

APPLICATION TO MARRY

1 GROOM'S NAME (First, Middle, Last) THOMAS JEFFREY MCCAUSLAND			2 DATE OF BIRTH (Month, Day, Year) DEC 31, 1955		
3a RESIDENCE - CITY, TOWN, OR LOCATION FORT LAUDERDALE		3b COUNTY BROWARD	3c STATE FLORIDA		4 BIRTHPLACE (State or Foreign Country) WASHINGTON
5a BRIDE'S NAME (First, Middle, Last) JENNIFER LEE WOODMAN			5b MAIDEN SURNAME (If different)		6 DATE OF BIRTH (Month, Day, Year) JUN 25, 1962
7a RESIDENCE - CITY, TOWN, OR LOCATION FORT LAUDERDALE		7b COUNTY BROWARD	7c STATE FLORIDA		8 BIRTHPLACE (State or Foreign Country) PENNSYLVANIA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

9 SIGNATURE OF GROOM (Sign full name using black ink) <i>Thomas Jeffrey McCausland</i>		10 SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) JUN 02, 2004	
11 TITLE OF OFFICIAL DEPUTY CLERK JOHN SIMMONS		12 SIGNATURE OF OFFICIAL (Use black ink) <i>John Simmons</i>	
13 SIGNATURE OF BRIDE (Sign full name using black ink) <i>Jennifer Lee Woodman</i>		14 SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) JUN 02, 2004	
15 TITLE OF OFFICIAL DEPUTY CLERK JOHN SIMMONS		16 SIGNATURE OF OFFICIAL (Use black ink) <i>John Simmons</i>	

LICENSE TO MARRY

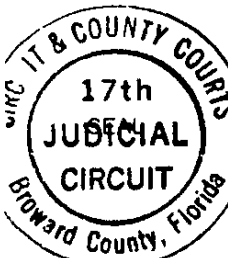
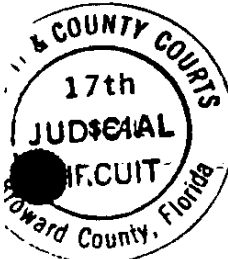
AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17 COUNTY ISSUING LICENSE BROWARD	18 DATE LICENSE ISSUED JUN 02, 2004	18a DATE LICENSE EFFECTIVE JUN 05, 2004	19 EXPIRATION DATE AUG 03, 2004
20a SIGNATURE OF COURT CLERK OR JUDGE <i>John Simmons</i>		20b TITLE DEPUTY CLERK JOHN SIMMONS	20c BY D.C.

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA

21 DATE OF MARRIAGE (Month, Day, Year) July 10th, 2004		22 CITY, TOWN, OR LOCATION OF MARRIAGE FORT LAUDERDALE FIA, I.C.W	
23a SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink) <i>Capt. Janice Shear</i>		23c ADDRESS (Of person performing ceremony) 423 Buttonwood Place Boca, 33431	
23b NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp) Janice Shear My Commission D0244299 Expires August 24 2007		24 SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>Philip Schmidt, M.D.</i>	
		25 SIGNATURE OF WITNESS TO CEREMONY (Use black ink) <i>[Signature]</i>	



SEAL

ATTACHMENT

40003735

#P99000110534

BROWARD COUNTY, FLORIDA
I certify this document to be a true
and correct copy of the original.
WITNESS MY HAND AND SEAL
on AUG 03 2004
HOWARD C. FORMAN
CLERK OF COUNTY & CIRCUIT COURT
BY: [Signature] D.C.