2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 29, 2009
Secretary of State

DOCUMENT# V29321

Entity Name: J MARK INC. OF CENTRAL FLORIDA

Current Principal Place of Business:

190 N WESTMONTE
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

2200 N ALAFAYA TRAIL, SUITE 100
ORLANDO, FL 32826 US

Current Mailing Address:

1220 INDUSTRIAL AVE.
HIAWATHA, IA 52233 US

New Mailing Address:

PO BOX 3097
EAU CLAIRE, WI 54702 US

FEI Number: 59-3114570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INCORP SERVICES INC
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: GAVIN, JOHN J JR
Address: 1220 INDUSTRIAL AVE
City-St-Zip: HIAWATHA, IA 52233

Title: P ( ) Delete
Name: FREDERIKSON, DAVID
Address: 1119 REGIS CRT
City-St-Zip: EAU CLAIRE, WI 54701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: GAVIN, JOHN J JR
Address: 1220 INDUSTRIAL AVE
City-St-Zip: HIAWATHA, IA 52233

Title: P (X) Change ( ) Addition
Name: FREDERIKSON, DAVID M
Address: 1119 REGIS CRT, SUITE 260
City-St-Zip: EAU CLAIRE, WI 54702

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.

SIGNATURE: DAVID M FREDERIKSON PRES 05/29/2009

Electronic Signature of Signing Officer or Director Date