

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 4:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **459580** (7)

1. Corporation Name
WILLIAM JEFFREY, INC.

Principal Place of Business
**150 TEMPLE GROVE DRIVE
WINTER GARDEN FL 34787**

Mailing Address
**150 TEMPLE GROVE DRIVE
WINTER GARDEN FL 34787**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/14/1974

3a. Date of Last Report
04/05/1994

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number
59-1569753

Applied For
 Not Applicable

Suite, Apt #, etc
22

Suite, Apt #, etc
27

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

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip
24

Country
25

Zip
29

Country
30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**HINSON, JEFFREY C.
246 HARBOR CT
WINTER GARDEN FL 34787**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature and typed or printed name of registered agent and fee if applicable) (FEE: Registered Agent signature required when resigning) (FEE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	HINSON, JEFFREY C. 246 HARBOR CT WINTER GARDEN FL	1. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		2. NAME	
STREET ADDRESS		3. STREET ADDRESS	
CITY, ST, ZIP		4. CITY, ST, ZIP	
TITLE VD	HINSON, WILLIAM H. 150 TEMPLE GROVE DR WINTER GARDEN FL	5. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY, ST, ZIP		8. CITY, ST, ZIP	
TITLE ST	HINSON, CARMEN L. 246 HARBOR CT WINTER GARDEN FL	9. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	
TITLE		13. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	
TITLE		17. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 111.07(3)(g), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *Jeffrey C. Hinson, President* 407 656 3397
 (Typed Name and Printed Name of Signing Officer or Director) (Typed Name & Title)
JEFFREY C. HINSON 4-15-95