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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90028 011 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 465802

1. Corporation Name

JUSTICE CORPORATION

Principal Place of Business

19329 U. S. 19 NORTH, SUITE 100
CLEARWATER FL 33764
US

Mailing Address

19329 U. S. 19 NORTH, SUITE 100
CLEARWATER FL 33764
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1974

4. FEI Number

59-1561565

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 1150 Cleveland Street

2a. Mailing Address

26 1150 Cleveland Street

Suite, Apt. #, etc.

22 Suite 420

Suite, Apt. #, etc.

27 Suite 420

City & State

23 Clearwater, Florida

City & State

28 Clearwater, Florida

24 33755-4860 25 Pinellas 29 33755-4860 30 Pinellas

9. Name and Address of Current Registered Agent

JUSTICE, ALBERT N
1309 US 19 SOUTH STE 100
CLEARWATER FL 33764

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
1150 Cleveland Street

83 Suite 420

84 City
Clearwater

FL

85 Zip Code
33755-4860

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE
NAME JUSTICE, ALBERT N
STREET ADDRESS 3040 HIBISCUS DR W
CITY-ST-ZIP BELLEAIR BCH, FL 00000 33786

TITLE VSD ☐ DELETE
NAME JUSTICE, JUDITH B
STREET ADDRESS 3040 HIBISCUS DR W
CITY-ST-ZIP BELLEAIR BCH, FL 00000 33786

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-99

(727) 441-5000

Date

Daytime Phone #

CR2E034 (11/98)