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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

JOYCE ENTERPRISES, INC.

FILED Feb 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						I I BEEFEL BLIGH LIJHH FREEF BYBAU BILLE BEI	A DEBE DINII			
30700 US 19 N 30700 US 19 N										
LOT #2 LOT 2						DO NOT WRITE IN THIS SPACE				
PALM HARBOR FL 34684 PALM HARBOR FL 34684 US US						3. Date Incorporated or Qualified				
03		00				07/18/1977				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Applie	d For
21 26						59-1749166			 ' '	oplicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.7	5 Addi	itional	
22		27			5. Certificate of Status Desired		Fee	Requi	red	
City & State	•	City & State			6. Election Campaign Financing			00 Ma		
23	28					Trust Fund Contribution	<u> </u>		led to F	
Zîp	Country	Zip	Cour	ııry		8. This corporation owes or has pal	_	ent yea] Yes	r Intang N	
24 25 29 30 30 9. Name and Address of Current Registered Agent						Personal Property Tax due June 10. Name and Address of New Reg			L IN	
eT/	OCKTON, WENDELL	r riegistered Agent	1	81	Name	10.	,			
30700 U.S. 19 NORTH, LOT #2			L		<u> </u>	(D.C. D. Allerte J. M. J. Alexandria				
LOT #2			į,	82	Street Addres	ss (P.O. Box Number is Not Acceptab	iej			
_	LM HARBOR FL 34684		83							
			L	-	0'1			los I	Zin Carl	
			1	- 1	City		FL	1	Zip Cod	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the ab	ove-i	named corpo	ration submits this statement for the p n's board of directors. I hereby accep	urpose of	changir	ng its re	gistered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a atlons of, Section 607.0505, Flo	utnorizea rida Statu	ı by t ıtes.	ine corporatio	n's board of directors. I hereby accep	true app	omunen	. as reg	stered
SIGNATURE	,									
	Signature, typed or printed name of registered age			Agent	signature required		DATE	OIDCO:	TODO IA	140
12.	V OFFICERS ANI	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS AND	Char		Addition
TITLE	STOCKTON, WENDELL JR.		1.2 NA		1			0.10.	8~	
NAME	35104 BUNKER HILL				DDRESS					
STREET ADORESS	FARMINGTON HILLS MI		1.4 CIT							
CITY-ST-ZIP	S S	DELETE	2.1 TIT		- 215			Char	ge _	Addition
NAME	STOCKTON, EDWARD		2.2 NA							
STREET ADDRESS	9062 POINT CYPRESS DR				DDRESS					1
CITY-ST-ZIP	ORLANDO FL		2, 4 CIT							
TITLE	P	☐ DELETE	3.1 T/TI					☐ Char	ige [Addition
NAME	STOCKTON, WENDELL SR		3.2 NA	ME						
STREET ADDRESS	30700 US 19 N., LOT 2		3,3 STR	REET AL	DDRESS					
CITY-ST-ZIP	PALM HARBOR FL		3.4. CIT	Y-ST	- ZIP		·	_		
TITLE	ī	☐ DELETE	4.1 TITI	LE				Char	ige [Addition
NAME	STOCKTON, JOYCE		4. 2 NA	ME						
STREET ADDRESS	30700 US 19 N., LOT 2		4.3 STREE		DDRESS					
CITY - ST - ZIP	PALM HARBOR FL		4,4 CIT	_	ZIP			<u> </u>		
TITLE		□ DELETE	5.1 TITLE					L Char	ige L	Addition
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE		DDRESS					
CITY - ST - ZIP			5.4 CITY -		ZIP			1 100		Addition
TITLE		☐ DELETE	6.1 TITLE					∐ Char	ige L	Addition
NAME			6.2 NAME							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP			6.4 CIT			ection 119.07(3)(i), Florida Statutes, I				

I nereby certify that the mormation supplied with his hing does not qualify for the exemption stated in Section 119.0/(3)(f), honder states. I latter certify that the mormation 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.