FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT



Corporation Name

Principal Place of Business

JEFFERS AND JEFFERS, INC.

CORPORATION ANNUAL REPORT		Katherine Harris Secretary of State	Secretary of State
1999		DIVISION OF CORPORATIONS	02-09-1999 90021 026 ***150.00
OCUMENT # 54	8632		

 A1201 (2014) \$1101	I INTER INEFERI	.,	F1811 81811 81811 1881

4613 9TH ST N NAPLES FL 341		4613 9TH ST N NAPLES FL 34103					
US		US	ı		DO NOT WRITE IN THI	IS SPACE	· _ · _ · _ · _ · _ · _ · _ · _ · _ · _
					Date Incorporated or Qualifed		
2. Principal PI	ace of Business	2a. Mailing Address			El Number	11/	applied For
21	,	26	ì		9-1774351		lot Applicable
Suite, Apt.	#; etc.	Suite, Apt. #, etc.			in Behavior		Additional
22		27		5. C	Certificate of Status Desired		Required
City & State		City & State			lection Campaign Financing rust Fund Contribution		May Be I to Fees.
in Zip	Country	Zip	Country	8. T	his corporation owes the current year li	ntangible	
24	25	29	30	Р	Personal Property Tax:	Yes	□No
in the	9. Name and Address of Curre	ent Registered Agent		10. i N	lame and Address of New Registered	Agent	
JEFF	ERS, NICHOLAS B SR		81	Name			
3628	BELAIR LANE		82	Street Address (P.C	D. Box Number is Not Acceptable)	***	
NAPL	ES FL 34103		83				
7			84	City		" 85 Zip	Code
agent. Lan	to the provisions of Sections 607.05 spistered agent, or both, in the Statun familiar with, and accept the oblig	e of Florida. Such change was a	uthorized by₁th	named corporation s ne corporation's boar	submits this statement for the purpose of d of directors. I hereby accept the appoint	f changing it ointment as i	s registered egistered
agent. Lan	sgistered agent, or both, in the State n familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was algations of, Section 607.0505, Florigation and title if applicable. (NOTE:	uthorized by the rida Statutes. Registered Agent si	ie corporation's boar	of directors. I hereby accept the appointment of the stating).	ointment as i	egistered .
agent. I an SIGNATURE	sgistered agent, or both, in the Stati n familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	e of Florida. Such change was an apations of, Section 607.0505, Florigent and title if applicable. (NOTE:	uthorized by the rida Statutes. Registered Agent si	ie corporation's boar	stating): DATE	ND DIRECT	egistered ORS IN 12
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SIGNATURE 112. THE STREET ADDRESS ONLY ST. ZIP THE	spistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A ST JEFFERS, NICHOLAS B JR 3628 BELAIR LANE	e of Florida. Such change was algations of, Section 607.0505, Floriget and title if applicable. (NOTE: NND DIRECTORS	rida Statutes Registered Agent si 13. 1.1 TITLE 1.2 NAME 1.3 STREET AL 1.4 CITY-ST-Z	ne corporation's boar	stating): DATE	ND DIRECT	egistered ORS IN 12 ☐ Addition
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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 in 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 information 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.

5.3 STREET ADDRESS

5.4 CITY+ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

IGNATURE:

DU-S GENERAL COMMENS

STREET ADDRESS

NAME STREET ADDRESS HIGH

CITY-ST-ZIP

DELETE

Change

☐ Addition