2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State
04-12-2004 90295 031 ***150.00

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1. Entity Name
J.J. TAYLOR COMPANIES, INC.

94048870

Principal Place of Business	Mailing Address
11780 U.S. HIGHWAY NO.1 NORTH PALM BEACH, FL 33408	11780 U.S. HIGHWAY NO.1 NORTH PALM BEACH, FL 33408

01152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-2234512
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TAYLOR, EDUARDA M
STREET ADDRESS	11780 US HIGHWAY ONE STE. 204
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	PDS
NAME	TAYLOR, JOHN J III
STREET ADDRESS	11780 U.S. HIGHWAY NO.1
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	VTD
NAME	DESPLAINES, HENRI J
STREET ADDRESS	11780 U.S. HIGHWAY NO.1
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408
TITLE	S
NAME	CABLE, STUART M
STREET ADDRESS	53 STATE STREET
CITY-ST-ZIP	BOSTON, MA 02109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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Entered DMT 4/5/04

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ HENRI J. DESPLAINES 3/25/04 561 775 1777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #