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

PROFIT Feb 18 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name M83276 (9) JIFFY JUMP OF SOUTHEAST, INC. Principal Place of Business Mailing Address 1313 WEST ADAMS ST 1313 WEST ADAMS ST JACKSONVILLE FL 32204-1301 JACKSONVILLE FL 32204-1301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/26/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2895563 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WATTERSON, GERALD E, JR 1313 WEST ADAMS ST. 62 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32204 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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, typod or printed name of registered agont and trim it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE Change Addition WATTERSON, GERALD E., JR NAME 1.2 NAME 3507 PEORIA RD. STREET ADDRESS 1.3 STREET ADDRESS ORANGE PARK FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DVP DELETE TITLE Addition 2.1 THILE NAME BLATTNER, IRMA 2.2 NAME 7313 W ADAMS ST STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE TITLE Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY+ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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

2/10/98

904-354-450

Block 12 or Block 13 if changed, or on an attachment with an address

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