FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N14471 1. Corporation Name

Country

9. Name and Address of Current Registered Agent

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Zip

JACKSON, JOHN

30205 STATE RD 19

TAVARES FL 32778

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Principal Place of Business	Mailing Address		<u> </u>
%JOHN JACKSON 30205 STATE ROAD 19 TAVARES FL 32778 US	%JOHN JACKSON 30205 STATE RD 19 TAVARES FL 32778 US		
2. Principal Place of Business	2a. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State	,	

Zip

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FILED Mar 29, 1999 8:00 am § Secretary of State

03-29-1999 90085 022 ****61.25



3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

10. Name and Address of New Registered Agent

Trust Fund Contribution

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

04/18/1986 4. FEI Number 59-2805357

11. Pursuant to the provisions of Sections 617.0502 and 617.1508. 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 617.0502. Plorida Statutes. SIGNATURE Signature OFFICERS AND DIRECTORS 1.1. A DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS IN 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. Change Addition AUSTIN, LESTER 12. NAME 305. N. PARK AVE 13. SINEET ADDRESS 14. Change Addition WINTER GARDEN FL 14. Change Addition 15. SO 16. STREET ADDRESS 16. STREET ADDRESS 16. STREET ADDRESS 17. ST.2P TITLE 10. DELETE 11. TITLE 10. Change Addition 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. Change Addition 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. STREET ADDRESS 17. ST.2P 18. STREET ADDRESS 18. S				84	City		- 1	85 Zip	Code
office or registered agent, or both, in the State of Florida. Such change was authorized bythe corporation's doubt of intertions. Therefore, agent 1 am familiar with, and eccept the obligation's of, section 617.0503, Florida's Statutes. SIGNATURE									
Signature, typed or printed rame of registered agent and steel reportance Agent agenture required when restricting) IUN-12	office or r	egistered agent, or both, in the State of FIG	rida. Such change was aut	nonzea by tr	named corporation's	ation submits this statement s board of directors. I hereby	for the purpose of y accept the appoi	cnanging its intment as re	registered egistered
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE	Signature, typed or printed name of registered agent and ti	tle if applicable. (NOTE: F	Registered Agent :	engrature required w				
AUSTIN, LESTER STREET ADDRESS 305 N. PARK AVE CITY-ST-ZIP WINTER GARDEN FL TITLE SD JACKSON, JOHN STREET ADDRESS 30205 STATE RD 19 22 STREET ADDRESS CITY-ST-ZIP TAVARES FL 11 STREET ADDRESS TAVARES FL 24 CITY-ST-ZIP TITLE TD JELETE 31 TITLE BOYD, MAURICE M. STREET ADDRESS 15400 OAKLAND AVE 33 STREET ADDRESS CITY-ST-ZIP TITLE P JENINGS, ROU STREET ADDRESS CITY-ST-ZIP TITLE P JENINGS, ROU STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP CHANGE STREET ADDRESS CHANGE STREET ADDRESS CHANGESS CHANGE	12.			13.		ADDITIONS/CHANGES	TO OFFICERS AN	D DIRECTO	ORS IN 12
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	CITY-ST-ZIP				·			-1E - 114 4*	(

Country

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Interiory certify that the information supplied with this litting does not qualify for the exemption stated in Section 1.19.07(3)(f), Fronda Statutes. Interior 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 617, 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:

352/343-4101

Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees