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May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000073444 (9)

1. Corporation Name

J.T. SMITH'S ENCORE PRODUCTIONS, INC.

Principal Place of Business

1805 IBIS LANE
SANIBEL FL 33957

Mailing Address

1805 IBIS LANE
SANIBEL FL 33957



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 P.O. Box 344		10/06/1994	
22 City & State		27 Suite, Apt. #, etc.		4. FEI Number	
23 Zip		28 Sanibel, FL		65-0555746	
24 Country		29 33957		Applied For	
		30 Lee		Not Applicable	
5. Certificate of Status Desired		6. Election Campaign Financing		8. This corporation owes or has paid the current year Intangible	
☐		☐		Personal Property Tax due June 30.	
				☒ Yes ☐ No	
				9. Name and Address of Current Registered Agent	
				10. Name and Address of New Registered Agent	

SMITH, J T
1805 IBIS LANE
SANIBEL FL 33957

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	SMITH, JOHN T.	1.2 NAME	
STREET ADDRESS	1805 IBIS LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SANIBEL FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	ST. JOHN, MARILYN	2.2 NAME	
STREET ADDRESS	579 RABBIT RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SANIBEL FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	DAVIS, LAUREN	3.2 NAME	
STREET ADDRESS	1597 SANDCASTLE RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SANIBEL FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lauren M. Davies 4/28/98 941-472-8930

CR2E034 (10/97)