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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400080463

JDF OF MANATEE, INC.

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90069 046 ***150.00



Principal Place of Business Mailing Address								II 80)II 88III 88III	19111 25111 61514) 41129 1111 1461
P.O. BOX 1520 BRADENTON FL 34206		P.O. BOX 1520 BRADENTON FL 34206				DO NOT V	VRITE IN THIS	SPACE		
							3. Date Incorporated or Quali	fed		
							10/18/1994			
2 Principal Pl	ace of Business	2a. Mailing Addres	SS				4. FEI Number		Ar	pplied For
21		26					65-0537837		No	ot Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, 6	etc.						\$8.75	Additional
22	.,	27				'	Certificate of Status Desired	.	Fee Re	equired
City & State		City & State				6. Election Campaign Financi	ng 🗆	\$5.00	May Be	
23		28				ļ	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Co	untry			8. This corporation owes the	current year In	tangible	
24	25	29	30				Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent				1	0. Name and Address of Ne	w Registered	Agent	
				81	Name					1
SVERDLOW, JEFFREY C					Street	Address	(P.O. Box Number is Not Acc	eptable)		
2808 20TH AVE E			82	Circot	, 100, 555	(1.0.000.1121120.00.10.11211	-,			
BRAD	DENTON FL 34208			83						
				-	0		<u> </u>		85 Zip	Code
				84	City			FL	_ 63 249	
office or re	to the provisions of Sections 607.0502 agistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such chang	e was authorize	ea by	tne corp	corporation's	ion submits this statement for board of directors. I hereby a	the purpose of ecept the appo	changing its intment as re	registered egistered
SIGNATURE								DATE		-
	Signature, typed or printed name of registered agent		(NOTE: Register		it signature	required whe	ADDITIONS/CHANGES TO		ND DIRECTO	ORS IN 12
12.	OFFICERS ANI	D DIRECTORS		TITLÉ		1	ADDITIONS/CHANGES TO	OTT TOETO	Change	Addition
TITLE	P CUEDDION ALAND	() 50	1	NAME						_
NAME	SVERDLOW, ALAN B									Į
STREET ADDRESS	601 LONGBOAD CLUB ROAD				ADDRESS	'				ļ
CITY-ST-ZIP	LONGBOAT KEY FL	□ DE		CITY-S'	1-ZiP				Change	Addition
TITLE	VPS									_ i
NAME	SVERDLOW, JEFFREY C			NAME		ŀ				
STREET ADDRESS	7714 19TH AVENUE N.W.				ADDRESS					
CITY-ST-ZIP	BRADENTON FL			CITY-S	T-ZIP		*		Change	Addition
TITLE		□ DE	I -	TITLE		İ			Cinerigo	
NAME				NAME						Į
STREET ADDRESS			3.3	STREET	ADDRESS	3				
CITY-ST-ZIP				CITY-S	T-ZIP	-			☐ Change	☐ Addition
TITLE		□ DE		TITLE						
NAME				NAME		1				
STREET ADDRESS			4.3	STREE	TADDRESS	3				
CITY-ST-ZIP				CITY-S	T-ZIP			 		Addition
TITLE		☐ DE		TITLE					Change	Addition
NAME				NAME					•	
STREET ADDRESS					TADDRESS	3				
CITY-ST-ZIP				CITY-S	T-ZIP	ļ				T A Jacobs
TITLE		□ DE		TITLE					☐ Change	☐ Addition
NAME			6.2	NAME		1				

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: _

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR