

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 561314 (6)

1. Corporation Name

JACKSONVILLE CONTRACTING & LEASING, INC.



Principal Place of Business

6555 TRADE CENTER DRIVE
JACKSONVILLE FL 32205

Mailing Address

6555 TRADE CENTER DRIVE
JACKSONVILLE FL 32205

2. Principal Place of Business

2a. Mailing Address

21 6555 Trade Center Dr.

26 3736 Cook Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23 Jacksonville, FL

28 Chesapeake, VA

Zip

Country

Zip

Country

24 32254

25 Duval

29 23323

30 N/A

g. Name and Address of Current Registered Agent

THOMAS, JOHN F
6555 TRADE CENTER DRIVE
JACKSONVILLE FL 32205

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, if applicable,

(P.O. Box Number is Not Acceptable)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
C	DONNEBORG, JES	5585 SABRE RD	NORFOLK VA	☒
D	IPSEN, CLAUS	5585 SABRE ROAD	NORFOLK VA	☒
D	MOLLER, EINOR	5585 SABRE RD	NORFOLK VA	☒
VPC	THOMAS, JOHN F.	5585 SABRE RD	NORFOLK VA	☒
D	LAUMTEN, JENS-OITLEV	5585 SABRE RD	NORFOLK VA	☒
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. CHANGE	6. ADDITION
Pres.-Director	Sven Frandsen	Mailing Address		☐	☒
Chairman	Freddy Frandsen	Mailing Address		☐	☒
Sec.-Tres.	John F. Thomas	Mailing Address		☒	☐
				☐	☐
				☐	☐
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John F. Thomas

4/2/96

804-485-0075

CR2E034 (12/95)