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FILED
Jan 28 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 371474 (8)

1. Corporation Name
JEFFERSON-ALLSOPP, INC.



Principal Place of Business
440 S. FLORIDA AVE.
LAKELAND FL 33801-5227
US

Mailing Address
440 S. FLORIDA AVE.
LAKELAND FL 33801-5227
US

3. Date Incorporated or Qualified
10/21/1970

3a. Date of Last Report
03/26/1996

4. FEI Number
59-1305607

Applied For
 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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9. Name and Address of Current Registered Agent

JEFFERSON, JACK
2302 NEVADA ROAD
LAKELAND FL 33802

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE VDC DELETE

NAME JEFFERSON, JACK

STREET ADDRESS 2302 NEVADA ROAD

CITY - ST - ZIP LAKELAND FL

TITLE PD DELETE

NAME POLLARD, JAMES S.

STREET ADDRESS 440 S. FLORIDA AVE.

CITY - ST - ZIP LAKELAND FL

TITLE D DELETE

NAME BOWLES, SAMUEL P.

STREET ADDRESS 440 S. FLORIDA AVE.

CITY - ST - ZIP LAKELAND FL

TITLE EVD DELETE

NAME WILSON, H.WAYNE

STREET ADDRESS 440 S. FLORIDA AVE

CITY - ST - ZIP LAKELAND FL

TITLE SDT DELETE

NAME POLLARD, JAMES S. III

STREET ADDRESS 440 S. FLORIDA AVE

CITY - ST - ZIP LAKELAND FL

TITLE VD DELETE

NAME MARTIN, BRANT C

STREET ADDRESS 440 SOUTH FLORIDA AVENUE

CITY - ST - ZIP LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE Change Addition

2.2 NAME Pollard, James S.

2.3 STREET ADDRESS 440 S. Florida Ave.

2.4 CITY - ST - ZIP Lakeland, Fl. 33801

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE Change Addition

6.2 NAME Martin, Brant C.

6.3 STREET ADDRESS 440 South Florida Ave.

6.4 CITY - ST - ZIP Lakeland, Fl. 33801

14. I do 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: *H. Wayne Wilson* H. WAYNE WILSON 1-21-97 941-688-7671

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

J-A

JEFFERSON-ALLSOPP, INC.

Insurance

440 SOUTH FLORIDA AVENUE

P.O. Box 3667

LAKELAND, FLORIDA 33802-3667

PHONE 688-7691

FAX 683-3790

VD

Martin, Mark A.

440 South Florida Ave.

Lakeland, Fl. 33801

D

Stephens, Penelope J.

440 South Florida Ave.

Lakeland, Fl. 33801



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