FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	MENT # 714162 JACKSONVILLE, INC.	2 (5)			
Principal Plac	ce of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·		
256 EAST CHURCH ST. JACKSONVILLE FL 32202		256 EAST CHURCH ST. JACKSONVILLE FL 32202-3132			
				3. Date Incorporated or Qualified 02/26/1968	3a. Date of Last Report 04/12/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 23-7024899	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for inta	
24	9. Name and Address of Curren		1301	10. Name and Address of New Regist	
·····			81 Name		
HOLSHO	USER, ERIC J.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
2065 HEF	rschel Street			Too to to the too the too to the	
JACKSON	NVILLE FL 32204		83		
			84 City		85 Zip Codo
11. Pursuant	to the provisions of Sections 617.0500	2 and 617.1508. Florida Statu	ites the above-named corr	poration submits this statement for the pure	FL 33 2 p 3 coas
office or r	registered guent, or both, in the State	of Florida Such change was	anthorized by the corporal	poration submits this statement for the purp ation's board of directors. I hereby accept th	e appointment as registered
SIGNATURS.	William William Coopi inc	DIN VIII	THE STATE OF THE S	•	
SIGNATURE	Standard, types printed rating of replaced the	Terio title I Applicable COM	IF Jugatered Agrit a unature requi		DATE
12.	OFFIC RS AND		13.	ADDITIONS/CHANGES TO OFFICER	
TITLE NAME	CD SEFTON, JOHN T	☐ DELETE *	1.1 TITLE		L. Change L Addition
STREET ADDRESS	200 LAURA STREET		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32202		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		Change Addition
NAME	WELTSEK, GUSTAVE J JR		2.2 NAME		
STREET ADDRESS	256 EAST CHURCH STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32202	Je Dr. czc	2.4 CITY-ST-ZIP		
TITLE	SD MEDDITT KENVON	K DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	MERRITT, KENYON 4306 VENETIA BOULEVARD		3.2 NAME		
CITY-ST-ZIP	JACKSONVILLE FL 32210		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE	TD	DELETE	4.1 TITLE		Change Addition
NAME	MILTON, GLENN		4. 2 NAME		_ ,
STREET ADDRESS	4000 ST JOHN'S AVENUE		4.3 STHEET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32205		4.4 CITY-ST-ZIP		
TITLE	D D	₹ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME .	JACKSON, VINCENT		5.2 NAME		
STREET ADDRESS	4002 ARROWSMITH JACKSONVILLE FL 32208		5.3 STREET ADDRESS		•
CITY+ST-ZIP	MONOCHALLE I E 02200	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		Ondings
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
Intormatio	in indicated on the annual tenori of ci	unniemental annual report is t	irua and accurate and that	d in Section 119.07(3)(i), Florida Statutes. I f I my signature shall have the same legal effi	aat aa if mada undar aath, that
I am an of appears in	fficer or director of the corporation or to n Block 12 or Block 13 II of anged, or	the receiver or trustee empow on an attachment with an ad-	vered to execute the repor dress.	rt as required by Chapter 617, Florida Statu	tes; and that my name

FILED Apr 08 1997 8:00am Secretary of State