1	PROFID PROPATION NUAL REPORT <b>1996</b>	Sandr Secr	ARTMENT OF STATE a B. Mortham etary of State F CORPORATIONS			
DOCL	JMENT # 1810	038 (1)				
	JRNER & SONS, INC.			1 500/00 1100/00 110/00 110/00 110/00 110/00		<b>.</b>
Provinal Pla	na of Business	Mailing Address				
Principal Place of Business 899 10TH ST. S. 911 10TH ST S NAPLES FL 33940		911 10TH STREET S	911 10TH STREET SOUTH NAPLES FL 33940-8235		_	·P····1
				3. Date incorporated or Qualified 10/11/1954	3a. Date of Last 02/27/1	
2. Principal   [21]	Place of Business	2a. Mailing Address 26		4. FEt Number 59-0730310		Applied For Not Applicable
Suite, Ap	t #.etc.	Suite, Apt. #, etc.			\$8.75 Additional Fee Required	
City & Sta 23	ate	City & State		6. Election Campaign Financing Trust Fund Contribution		
Zipi 24	Country 25	Zip 29	Country 30	8. This corporation has liability for i	******	MT
	9. Name and Address of C	Surrent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
TURNER,LESLIE				fress (P.O. Box Number is Not Acceptab		
	26TH AVE N Es Fl 33940		83			
			B4 City			7 o Ooda
11 Purstian	to the provisious of Sections 607	0502 and 607 1608 Elorida State				Zip Code
or regist familiar y	tered agent, or both, in the State o with, and accept the obligations of	f Floricia. Such change was author , Section 607.0505, Florida Statute	ized by the corporation's boa	ration submits this statement for the pur ard of directors. I hereby accept the appo	pose of changing its pintment as registere	egistereo onice : ed agent. I am
SIGNATURE	Signations, typical or printien manie of negative	diamentia id blue if accelerable 👘 🔥	IOTE Registered Appet signature requir	urt when ministration	DA1E	
12.		IS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		FORS IN 12
10LE NAME	TURNER,LESLIE	🗂 DELETE	1 TITLE		🗋 Change	e 🗋 Addition
NAME STREET ADDRESS	1230 26TH AVE N		1.2 NAME 1.3 STREET ADDRESS			
CHT+ST-2IP	NAPLES FL		1.4 CITY - ST - ZIP			L
THLE	TD DUCE BUDY	DELETE	2 1 TITLE		📋 Change	e 🗋 Addition
NAMÉ	TURNER, RALPH 15TH AVE., S.W.		2 2 NAME			
STREET ADORESS	NAPLES, FL 00000		2 3 STHEET ADDRESS			
_COLY SE ZIE _ TILE	SD		2.4 CHY - ST - ZIP 3.1 TITLE		Change	e Addition
NAME	TURNER, NICHOLAS		3 2 NAME			
STREET ADORESS	920 10TH ST S		3 3 STREET ADDRESS			
CHTY - ST - 24	NAPLES, FL 00000	, <u>,</u>	3.4 CITY - ST - ZIP			
1011	VD TURNER, THOMAS E	DELE TE	4. 1 TITLE		🗋 Change	e 🗋 Addition
NAME SINELLADORESS	57 EAST AVE		4.2 NAME			
- SUNTER DUNESS - CITY- ST-ZIE	NAPLES, FL 00000		4.3 STREET ADDRESS			
THEF.		DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		[] Change	e Addition
NAME		_	5.2 NAME			
STREET ADDRESS	s		5 3 STHEET ADDRESS			[
CHY-ST ZH			5 4 CITY - ST - ZIP			
DIFLE Name		DEL É TE	6 1 THLE		🛄 Change	e 🗋 Addition
NAMI STRUTT ADDRESS	<		6 2 NAME			
- GHA - ST ZIE			6 3 STREET ADDRESS 6 4 CITY - ST - ZIP			
14. I do here	eby certify that the information sup	plied with this filing is voluntarily fu	nished and does not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Stat	utes. I further
oath; tha	1a: the information indicated on this	s annual report or supplemental an corporation or the receiver or trust	riual report is true and accur ee empowered to execute th	ate and that my signature shall have the is report as required by Chapter 607, Fig	come local effect or	if made under
	TURE: Micholor	f.		1-19-96	All A	
				1 - 1 4 - 4/		