

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

FILED  
Apr 27 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 201452 (0)

1. Corporation Name

JACKSONVILLE ENTERPRISES, INC.

Principal Place of Business

WILLIAM R CESERY  
2647 CESERY BLVD  
JACKSONVILLE FL 32211

Mailing Address

WILLIAM R CESERY  
2647 CESERY BLVD  
JACKSONVILLE FL 32211

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1957

4. FEI Number

59-0863110

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 6132 Merrill Rd.

Suite, Apt. #, etc.

22 #12

City & State

23 Jacksonville, Fl.

Zip

24 32211

Country

25

2a. Mailing Address

26 6132 Merrill Rd.

Suite, Apt. #, etc.

27 #12

City & State

28 Jacksonville, Fl.

Zip

29 32211

Country

30

9. Name and Address of Current Registered Agent

CESERY JR., WILLIAM  
2647 CESERY BOULEVARD  
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent

81 Name

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

6132 Merrill Rd. #12

83

84 City

Jacksonville,

FL

85 Zip Code

32211

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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

PD  
NAME CESERY, WILLIAM R., JR.  
STREET ADDRESS 2647 CESERY BLVD.  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

VD  
NAME TAYLOR, MARTHA C.  
STREET ADDRESS 2647 CESERY BOULEVARD  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

VDAS  
NAME CESERY, BARBARA H  
STREET ADDRESS 2647 CESERY BLVD  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

6132 Merrill Rd. #12

1.4 CITY-ST-ZIP

Jacksonville, Fl. 32211

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

1415 Palm Avenue

2.4 CITY-ST-ZIP

Jacksonville, Fl. 32207

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

6132 Merrill Rd. #12

3.4 CITY-ST-ZIP

Jacksonville, Fl. 32211

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 the back of this report with an address.

SIGNATURE *William R. Cesery Jr.* 4/21/98 90A 70A-4687

CR2E034 (10/97)