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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 212945

Principal Place of Business

(0)

JACK TANNER COMPANY

Mailing Address

FILED May 08 1998 8:00am Secretary of State



\$901 PENDRAGON LANE 5901 PENDRAGON LANE FT MYERS FL 33912 FT MYERS FL 33912 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/12/1958 Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 59:0834614 Suite, Apt. #, etc. Suite Apt # etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TANNER, JACK S. **5901 PENDRAGON LANE** 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33912 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** Signature, or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE PD 1 S TITLE ☐ Change ☐ Addition NAME TANNER, JACK S. 12 NAME **5901 PENDRAGON LANE** STREET ADDRESS 1.3 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 1.4 City-St-ZIP DELETE TITLE Change 2.1 TELE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ___ Addition NAME 4. 2 NAME **ETREET ADDRESS** 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TID F 5.1 TITLE Change Addition MALE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE ■ DELETE 6.1 TITLE Change ☐ Addition NU. 6.2 NAME **STREET ADDRESS 63 STREET ADDRESS** CITY-ST-ZIP 64 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 an attendment with an address.

RIGNATURE:

por atomer

Tock Towner

4-29-91

941-433-5901