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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 222421 1. Corporation Name

J.J. KERLEY, INC.

FILED Jan 21, 1999 8:00am **Secretary of State** 01-21-1999 90007 028 ***150.00

Principal Pla	ce of Business	Mailing Address			1 100 to	Mines Biffet Biffet miner Arbit 1981
195 HELIOS DR JUPITER FL 33477 US		195 HELIOS DR JUPITER FL 33477 US			DO NOT WRITE IN THE	S SPACE
					3. Date Incorporated or Qualifed 04/10/1959	
Principal Place of Business 2a. Mailir		2a. Mailing Address	ailing Address		4. FEI Number	Applied For
21		26		59-0865729	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional 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	Coun 30	try	This corporation owes the current year In Personal Property Tax.	tangible □ Yes □ No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered	Agent
.,) FV (01) L			81 Name		· — — — — — — — — — — — — — — — — — — —
KERLEY, JOHN J. 195 HELIOS DR			}	B2 Street Add	dress (P.O. Box Number is Not Acceptable)	
JUF	PITER FL 33477		h	83		
				84 City		85 Zip Code
SIGNATURE	am familiar with, and accept the oblig	,			red when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITL	E		Change Addition
NAME	KERLEY,JOHN J		1.2 NAM	tE .	•	
STREET ADDRESS	,		1.3 STR	EET ADORESS	4	ı
CITY-ST-ZIP	JUPITER FL 33477	C DELETE		'-ST-ZIP		Characa C Addition
TITLE	D NEDIEV BADBADA	☐ DELETÉ	2.1 TITL	'	•	☐ Change ☐ Addition
NAME	Kerley,Barbara 195 Helios Dr		2.2 NAW			
STREET ADDRESS	JUPITER FL-33477		8.	EET ADDRESS	The second of th	
- CITY-ST-ZIP	OCH ILLE COATT	☐ DELETE	3.1 TITL	Y-ST-ZIP E		Change Addition
NAME			3.2 NAM	1		
STREET ADDRESS	s Property of the second of th			EET ADDRESS		
CITY-ST-ZIP	A Comment of the Comm		3.4. C/T	Y-ST-ZIP		
TITLE		☐ DELETE	4,1 TITL			Change . Addition
NAME			4. 2 NA	Æ .		•
STREET ADDRESS	3		4.3 STR	EET ADDRESS		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE		☐ DELETE	5.1 TITL	E		Change Addition
NAME	· ·				•	Colonge Cradition
STREET ADDRESS	ì		5.2 NAM	1		
COLVET TO	s .		5.3 STR	EET ADDRESS	·	Contained Contained
CITY-ST-ZIP			5.3 STR 5.4 CITY	EET ADORESS		
TITLE		☐ DELETE	5.3 STRI 5.4 CITY 6.1 TITU	EET ADORESS '-ST-ZIP	·	Change Addition
TITLE NAME		☐ DELETE	5.3 STR 5.4 CITY 6.1 TITU 6.2 NAM	EET ADORESS '-ST-ZIP E	·	
TITLE		☐ DELETE	5.3 STRI 5.4 CITY 6.1 TITU 6.2 NAM 6.3 STRI	EET ADORESS '-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 attachment with an address, with all other like empowered.

SIGNATURE: