FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **340909** **(1)**

1. Corporation Name
JACKSONVILLE SOUND & COMMUNICATIONS, INC.

Principal Place of Business
5021 STEPP AVENUE
JACKSONVILLE FL 32216

Mailing Address
5021 STEPP AVENUE
JACKSONVILLE FL 32216

3. Date Incorporated or Qualified **01/31/1969**

3a. Date of Last Report **05/01/1995**

4. FEI Number **59-1229041** Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. **Name and Address of Current Registered Agent**
SICK, WILSON W., JR.
8070 LAKECREST DR.
JACKSONVILLE FL 32256

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 _____ DATE _____
Signature, typed or printed name of registered agent, and title, if applicable (Note: Registered Agent signature is required when a change is indicated)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
DP	SICK, ROBERT A	3509 S OCEAN DR	JACKSONVILLE BCH FL	☐
SVD	HUNTER,FREDERICK S	13112 MANDARIN ROAD	JACKSONVILLE FL	☐
VD	BRAUN, WILLIAM L.	7240 SECRET WOODS DR.	JACKSONVILLE FL	☐
CTD	SICK, WILSON W., JR.	8070 LAKECREST DR.	JACKSONVILLE FL	☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE				☐ Change ☐ Addition
12 NAME				
13 STREET ADDRESS				
14 CITY-ST-ZIP				
21 TITLE				☐ Change ☐ Addition
22 NAME				
23 STREET ADDRESS				
24 CITY-ST-ZIP				
31 TITLE				☐ Change ☐ Addition
32 NAME				
33 STREET ADDRESS				
34 CITY-ST-ZIP				
41 TITLE				☐ Change ☐ Addition
42 NAME				
43 STREET ADDRESS				
44 CITY-ST-ZIP				
51 TITLE	V			☐ Change XX Addition
52 NAME	Robert E. Begley, Jr.			
53 STREET ADDRESS	2414 Green Spring Drive			
54 CITY-ST-ZIP	Jacksonville, FL 32246			
61 TITLE				☐ Change ☐ Addition
62 NAME				
63 STREET ADDRESS				
64 CITY-ST-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attached sheet, with an address.

SIGNATURE: Robert E. Begley, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 Date

904-737-3511 Daytime Phone #

CR2E034 (12/95)