

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

FILED
Apr 24 1996 8:00 am
Secretary of State

DOCUMENT # 416200 (4)

1. Corporation Name

JTB DEVELOPMENT COMPANY

Principal Place of Business

4221-10 BAYMEADOWS ROAD
#10
JACKSONVILLE FL 32217
US

Mailing Address

4221 BAYMEADOWS ROAD
#10
JACKSONVILLE FL 32217
US

3. Date Incorporated or Qualified
01/08/1973

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

2. Principal Place of Business

21 8705 Perimeter Park Blvd.

Suite, Apt. #, etc.

22 #8

City & State

23 Jacksonville, FL

Zip

24 32216

Country

25 Duval

2a. Mailing Address

26 8705 Perimeter Park Blvd.

Suite, Apt. #, etc.

27 #8

City & State

28 Jacksonville, FL

Zip

29 32216

Country

30 Duval

4. FEI Number

59-1432522

Applied For

Not Applicable

5. Certificate of Status Desired

XX

\$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

9. Name and Address of Current Registered Agent

FORT, DONALD C
4221-10 BAYMEADOWS RD.
SUITE 10
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

81 Name

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

8705 Perimeter Park Blvd. Suite 8

83

84 City

Jacksonville,

FL

85 Zip Code

32216

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 the corporation)

(Name of registered agent signing required when new state agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
VP
TYE, GAIL D
STREET ADDRESS
4221-10 BAYMEADOWS ROAD
CITY-ST-ZIP
JACKSONVILLE FL

TITLE ☐ DELETE

NAME
SDV
FORT, JOHNETTE
STREET ADDRESS
10454 SYLVAN LN., W.
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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

V

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

8705-8 Perimeter Park Blvd.
Jacksonville, FL 32216

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

P

☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

Donald C. Fort
8705-8 Perimeter Park Blvd.
Jacksonville, FL 32216

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 an attachment with an address.

SIGNATURE:

Gail D. Tye

Gail D. Tye

4/17/96

(904) 641-0018

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Corporate Phone #

CR2E034 (12/95)