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

Apr 03 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # 568240 (6)JACK BECK CORPORATION Principal Place of Business Mailing Address **PUNTA GORDA FL 33983** PUNTA GORDA FL 33983-6137 3a. Date of Last Report 3. Date Incorporated or Qualified 04/10/1978 05/14/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-2057741 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name MCKERNAN, PATRICK W 1288 ODYSSEY 82 Street Address (P.O. Box Number is Not Acceptable) PUNTA GORDA, FL 83 **PUNTA GORDA FL 33983** 84 City 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, typed or punted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DITE Change Addition TITLE 1.1 TILE MCKERNAN, PATRICK W. NAME 1.2 NAME 1288 ODYSSEY STREET ADDRESS 1.3 STREET ADDRESS **PUNTA GORDA FL** CHTY-ST-ZIP 1.4 CHY- \$1-7IP DELETE Change Addition TITLE 2.1 TO LE MCKERNAN, JENNY NAME 2.2 NAME 1288 ODYSSEY STREET ADDRESS 2.3 STREET ADDRESS **PUNTA GORDA FL** CITY-ST-ZIP 2. 4 CITY - ST- 7IP DELETE X Addition VICE PRESIDENT Change TITLE 3.1 1111.8 NAME 3.2 NAME STEVE GOOT 215 MARBLE STREET STREET ADDRESS 3.3 STREET ADDRESS HAMMOND, INDIANA 44327 CITY-ST-ZIP 3.4. CITY- \$1- ZIP TITLE DELETE 4.1 1/10 Change Addition 4. 2 NAMI STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 DiTY-S1-7IP DELEVE Change Addition TITLE 5 1 111LE

14. I do hereby certify that the information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or trustee expowered 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.

5.2 NAME

6.1 1111.6

6.2 NAME

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY- \$1 - 719

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

THE THE

DELETE

157/97 219.937.5077

Change

Addition

FILED