SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:55

DOCUMENT # 568450 (1)

1. Corporation Name
J.D.L. CORPORATION

Principal Place of Business
P.O. BOX 10067
LARGO FL 34643

Mailing Address
10835 INDIAN HILLS CT.
SUITE 21
LARGO FL 34647
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/13/1978
3a. Date of Last Report: 04/22/1994
4. FEI Number: 59-1811281 — 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	2a. Mailing Address
21 13051A 92nd St. N	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 LARGO FL	City & State 28
Zip 24 34643 — Country 25 USA	Zip 29 — Country 30

9. Name and Address of Current Registered Agent

WALSH, JOHN J. III
10835 INDIAN HILLS CT #21
LARGO FL 34647

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 JOHN J. WALSH III — [signature] — 6/27/95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	TITLE	VP ☐ Change ☑ Addition
NAME	WALSH, JOHN J. III	NAME	GERALD R. CUSTER
STREET ADDRESS	10835 INDIAN HILLS CT #21	STREET ADDRESS	2152 LONG BOW LA
CITY-ST-ZIP	LARGO FL	CITY-ST-ZIP	CLEARWATER FL 34624
TITLE	VP GERALD R. CUSTER	TITLE	TREASURER ☐ Change ☑ Addition
NAME		NAME	Mrs. TILSON
STREET ADDRESS	2152 LONG BOW LA	STREET ADDRESS	2865 LENOX RD. APT 305
CITY-ST-ZIP	CLEARWATER FL 34624	CITY-ST-ZIP	ATLANTA GA 30324
TITLE	TREASURER	TITLE	SECRETARY ☐ Change ☑ Addition
NAME	~~Dena~~ M.B TILSON	NAME	DENNIS McCORMACK
STREET ADDRESS	2865 LENOX RD APT 305	STREET ADDRESS	102 4th STREET
CITY-ST-ZIP	ATLANTA GA 30324	CITY-ST-ZIP	BELLAIR BEACH FL 34634
TITLE	SECRETARY	TITLE	☐ Change ☐ Addition
NAME	DENNIS McCORMACK	NAME	
STREET ADDRESS	102 4th STREET	STREET ADDRESS	
CITY-ST-ZIP	BELLEAIR BEACH FL 34634	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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)(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.

SIGNATURE: [signature] JOHN J WALSH III — 6/27/95 — (813) 581 4198
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

CR2E034 (3/95)

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