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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DO 1. Cor

(0)

**FILED** Feb 04 1997 8:00am Secretary of State

CUMENT poration Name	#	576648	

THE JAMES GANG INC

THE DAVIES GAING, INC.					
Principal Place of Business	Mailing Address				
7045 OKEECHOBEE RD. FT. PIERCE FL 34945	7045 OKEECHOBEE RD. FT. PIERCE FL 34945-2606				

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-			-					
						3. Date Incorporated or Qualified 06/22/1978	3a. Date of I 04/23/19	
2. Principa P	lace of Business	2a. Mailing Address	•		··········	4. FEI Number	<u> </u>	Applied For
21		26				59-1848854		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						E Continues of Status Desired	□ \$8	75 Additional
22 27						5. Certificate of Status Desired	ъ · <sub>F</sub>	ee Required
City & State	е	City & State				6. Election Campaign Financing	\$!	5.00 May Be
23		28				Trust Fund Contribution		dded to Fees
Ζφ	Country	Zip	Co	untry	*****	8. This corporation has liability for in	ntangible tax ur	der s. 199.032
24	25	29	30				] Yes □ No	
	9. Name and Address of Curr		10. Name and Address of New Registered Agent					
GER	IALD S. JAMES			81 1	Name			
704!	OKEECHOBEE RD.			-   -   -				
	PIERCE FL 34945			82 5	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	
, ,,,	TEHOL I E OTOTO			83				
				84	City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0	1502 and 607.1508, Florida Stati	utes, the	above-n	amed corpo	oration submits this statement for the p	urpose of chan	ging its registered
office or r	registored agent, or both, in the Sta im familiar with, and accept the ob	ate of Florida. Such change was digations of Section 607 0505. I	s authorize	ed by th	ne corporati	ion's board of directors. I hereby accep	t the appointme	ent as registered
SIGNATURE	in terrings with entire decept the end	inganors or, oconor our, osos, r	TOTOE ST	atutos.				
	Signers in Typed or proved har and registered		OTE: Register	red Agent s	signature require	ed when reinstaling)	DATE	************
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	DELETE	1.1	TITLE			[] Cr	nange L Addition
NAME	JAMES, GERALD S		1.2	NAME				
STREET ADDRESS	7045 OKEECHOBEE RD.		1.3	STREET AD	DRESS			
CITY - ST - ZIP	FT. PIERCE FL		1.41	CITY-ST-Z	ZIP			
TITLE	VP	DELETE		TITLE		, , , , , , , , , , , , , , , , , , ,	☐ CI	nange Addition
NAME	JAMES, JUDY		22	NAME				
STREET ADDRESS	7045 OKEECHOBEE RD.		23	STREET AD	IDRESS			
CITY - ST - ZOP	FT. PIERCE FL 34945			CITY-ST-	· · · · ·			
711LE		☐ DELET€		TITLE	EN .		T T CI	nange Addition
NAME		K WELLE		NAME			o	
STREET ADDRESS					norce			
				STREET AD				
CITY - ST - ZIP		DELETE		CITY-ST-	ZIP			nange Addition
TITLE		<u>ו</u> "ו הנונונ		TITLE			, L., W	nange L Addition
NAM(				NAME				
STREET ADDRESS				STREET AD				
CITY - ST - ZIP				CITY-ST-	ZIP			· -
TITLE		DELETE	5.1	TITLE			Ľ, Ci	nange 🛄 Addition
NAME :			5.2	NAME				
STREET ADDRESS			53	STREET AD	DRESS			
CITY - ST - 7/P			5.41	CITY-ST-	ZiP			
THE		DELETE	6.1	TITLE			c	nange Addition
NAVE .			6.21	NAME				
STREET ADDRESS				STREET AD	DRESS			1
			I I					
City - St - ZiP		Lead with this filler door not not		CITY-ST-		Lin Continu 110 07/37/3) Electeda Platesta	(	

I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR