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 # **578302** **(2)**

1. Corporation Name
JONATHAN'S LANDING REALTY, INC.

Principal Place of Business
17290 JONATHAN DRIVE
JUPITER FL 33477-5823

Mailing Address
17290 JONATHAN DRIVE
JUPITER FL 33477-5823

3. Date Incorporated or Qualified: 07/11/1978
3a. Date of Last Report: 03/08/1995
4. FEI Number: 59-1861706 — 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 c/o Accounting Dept Inc
Suite, Apt. #, etc.
27 185 Indianwood Rd, 126
City & State
28 Jupiter, FL
Zip 29 33477 Country 30 Palm Beach

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent's signature is required if applicable) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	COMBS, CRAIG L	1.2 NAME	
STREET ADDRESS	17290 JONATHAN DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	1.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ZEITLER, JEROME R.	2.2 NAME	
STREET ADDRESS	35 GOLFVIEW DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA FL	2.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	PAPAGEORGE, THERESA A	3.2 NAME	
STREET ADDRESS	17290 JONATHAN DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	YURA, DOLORES A.	4.2 NAME	
STREET ADDRESS	1501 ALCOA BUILDING	4.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURGH PA	4.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	DISCHNER, E. L	5.2 NAME	
STREET ADDRESS	425 6TH AVENUE, ALCOA BLDG.	5.3 STREET ADDRESS	
CITY-ST-ZIP	PITTSBURGH PA	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: Craig L. Combs — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
1/22/96 — Date
407-747-5500 — Daytime Phone #

CR2E034 (12/95)