

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 580201 (2)
1. Corporation Name
ROGER JORN ASSOCIATES, INCORPORATED



Principal Place of Business
1010 TENTH AVE. NORTH
P.O. BOX 1429
LAKE WORTH FL 33460

Mailing Address
1010 TENTH AVE. NORTH
P.O. BOX 1429
LAKE WORTH FL 33460

3. Date of Incorporation or Qualified	07/26/1978	3a. Date of Last Report	04/03/1995
4. FEI Number	59-1846004	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. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
JORN, ROGER 1010 TENTH AVE. NORTH LAKE WORTH FL 33460		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. State	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 _____ DATE _____
Signature typed or printed name of registered agent with title (if applicable) (Printed Registered Agent Signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1. TITLE	☐ Change ☐ Addition
NAME	JORN, ROGER	12. NAME	
STREET ADDRESS	1010 TENTH AVE, NORTH	13. STREET ADDRESS	
CITY- ST- ZIP	LAKE WORTH FL	14. CITY- ST- ZIP	
TITLE	V	2. TITLE	☐ Change ☐ Addition
NAME	WELSH, TONIA M	22. NAME	
STREET ADDRESS	1010 TENTH AVE. NORTH	23. STREET ADDRESS	
CITY- ST- ZIP	LAKE WORTH, FL.	24. CITY- ST- ZIP	
TITLE		3. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY- ST- ZIP		34. CITY- ST- ZIP	
TITLE		4. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY- ST- ZIP		44. CITY- ST- ZIP	
TITLE		5. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY- ST- ZIP		54. CITY- ST- ZIP	
TITLE		6. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY- ST- ZIP		64. 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: _____ DATE: 4/17/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: ROGER JORN, CEO
Diss. 407-586-2310
Custodian Phone #

CR2E034 (12/95)