

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

FILED

**Jan 20 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 623387 (8)

1. Corporation Name
J. ANDERSON, INC.

Principal Place of Business 1381-F MARKET CIR PORT CHARLOTTE FL 33953 US	Mailing Address 1072 SEACREST DRIVE PORT CHARLOTTE FL 33948
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26	1381-F Market Circle	05/30/1979	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				59-1916094	
22. City & State		27. City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23		28 Port Charlotte, FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24		29 33953	30 US		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EMERICH, GUY S. 115 WEST OLYMPIA AVENUE PUNTA GORDA FL 33950				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VST <input type="checkbox"/> DELETE	1.1 TITLE	VST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, GAIL W	1.2 NAME	Gail W. Anderson
STREET ADDRESS	1072 SEACREST DR	1.3 STREET ADDRESS	1381-F Market Circle
CITY-ST-ZIP	PORT CHARLOTTE FL	1.4 CITY-ST-ZIP	Port Charlotte, FL 33953
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, JAMES E	2.2 NAME	James E. Anderson
STREET ADDRESS	1072 SEACREST DR	2.3 STREET ADDRESS	1381-F Market Circle
CITY-ST-ZIP	PORT CHARLOTTE FL	2.4 CITY-ST-ZIP	Port Charlotte, FL 33953
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: *Gail W. Anderson* 1/15/98 941-625-3911

CR2E034 (10/97)