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

DOCUMENT # 648148

(5)

JERNCO, INC.

FILED Mar 19 1997 8:00am Secretary of State

			1	١			l		l	İ				I			Ì		ı	۱				١	ľ	Ì		ĺ												ľ						
ı		I	ı	ı	II	ı	l	١	ı	ı	i	I	I	l	l	I	I	ı	ı	ı	l	l	I	ı	I	ı	I	ı	ŀ	ı	l	ŀ		l	I	I	I	ŀ	H	i	ł	Н	H	l	ĺ.	ı

Principal Plane of Business	Mailing Address		j indiin diili bibar loyal bibal bibal bari q	INII BENET BINII AINII ATAH WINII INNI
12707 FOUR OAKS RD TAMPA FL 33624 US	P O BOX 8896 Tampa FL 33674-8896 US			
	.		3. Date Incorporated or Qualified 12/13/1979	3a. Date of Last Report 06/13/1996
2. Principal Frace of Business	28. Mailing Address	four oaks nd	4. FEI Number	Applied For
21 Suite Apt #, etc	26 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	idoic opportion		Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State mpA	FL	6. Election Campaign Financing	\$5.00 May Be
23			Trust Fund Contribution	Added to Fees
····y Till	29 33624 30	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Í Yes — □ No
5 14	ddress of Current Registered Agent		10. Name and Address of New Reg	
NICHOLS, TOM H		81 Name		
12707 FOUR OAKS R	RD	82 Street Addre	ss (P.O. Box Number is Not Acceptab	e)
TAMPA, FL			· · · · · · · · · · · · · · · · · · ·	<u> </u>
33624		83		
		84 City		FL 85 Zip Code
11 Parament Lathic penalisions of	Sections 607,0502 and 607 1508, Florida Statutes, the	e above pamed corpo	ration submits this statement for the n	
SIGNATURE		stered Agont signature required		DATE
12.	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change
NAME NICHOLS, TOM		1.1 TOLE 1.2 NAME		— pustide — vodino
SIRELL ADVINESS 6009-12TH ST	" 12/17 TOWEDAKS KO	1.3 STREET ADDRESS		
ciry St. Zer TAMPA, FL 336	104 TPA FL 33624	14 CiTY - ST - ZIP		
1-14	DETETE	2 1 TITLE		Change Additio
NAME		2 2 NAME		
SURFER ADDRESS		2 3 STREET ADDRESS		
MATERIAL TOTAL TOT		2 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
ΨγΛ:		3.2 NAME		T Allering T Month
SHIEL ADJECTS		3 3 STREET ADDRESS		
£ 1r · 5 ; 7e		3.4. CITY - \$1 - ZIP		
TISTE		4.1 TITLE		Change Addit-o
NAMI	1	4. 2 NAME		
SHEEF MODESS CIEV \$1 750		4 3 STREET ADDRESS		
TILL		5.1 TITLE		Change Additio
NoMi	J	52 NAME		
STREET ACTORIESS	l.	5 3 STREET ADDRESS		
CITY ST 749	The same of the sa	5.4 CITY - ST - ZIP	····	
TITLE		6.1 TITLE		Change Additio
NAV!		6.2 NAME		
STHELLADISE OF		6.3 STREET ADDRESS		
CIT'S OF L	Land Company of the state of th	64 CITY - ST - ZIP	S C - 150 07(0)() Florid - Cost to	39 0 0

Last ereby certify that the information supplies 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 Lam are officed or direction of one-score freedown or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Book 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/97

813969-4630

nna Phione #