

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

FILED  
Apr 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 662468

(8)

1. Corporation Name

JEFF INVESTMENTS, INC.

Principal Place of Business

3317 S 8TH ST  
TACOMA WA 98405

Mailing Address

3317 S 8TH ST  
TACOMA WA 98405-2204

3. Date Incorporated or Qualified

05/08/1980

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALLS, JAMES R - Pres  
~~1800 1ST STREET~~  
~~JACKSONVILLE FL 32202~~

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 title if applicable.

NOTE: Registered Agent signature required when reinstating.

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE

NAME WALLS, JAMES R.

STREET ADDRESS ~~1800 1ST STREET~~

CITY-ST-ZIP ~~JACKSONVILLE FL 32202~~

TITLE S ☒ DELETE

NAME SHARPE, CHRISTINE L.

STREET ADDRESS ~~PA 10000 N/A~~

CITY-ST-ZIP ~~JACKSONVILLE FL~~

TITLE T ☒ DELETE

NAME ~~SHARPE, KIMBERLY~~

STREET ADDRESS ~~PA 10000 N/A~~

CITY-ST-ZIP ~~JACKSONVILLE FL~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME JAMES R. WALLS

1.3 STREET ADDRESS 3317 S 8TH ST

1.4 CITY-ST-ZIP TACOMA WA. 98405

2.1 TITLE S ☒ Change ☒ Addition

2.2 NAME JEFFREY D. WALLS

2.3 STREET ADDRESS 3317 S 8TH

2.4 CITY-ST-ZIP TACOMA WA. 98405

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 REQUIRED James R. Walls 4/16/97

CR2E034 (9/96)