

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JAN 25 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 688783 (0)

1. Corporation Name

TMJB INVESTMENTS, INC.

Principal Place of Business

111 RIVERSIDE AVENUE
P O BOX 44100
JACKSONVILLE FL 32231-4100

Mailing Address

111 RIVERSIDE AVENUE
P O BOX 44100
JACKSONVILLE FL 32231-4100

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/09/1980

3a. Date of Last Report

05/01/1994

4. FBI Number

59-2036000

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

VANDERGRIFF, C. EDWARD
111 RIVERSIDE AVE.
JACKSONVILLE FL 32231-4100

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 title if applicable.

NOTE: Registered Agent signature required when reinstating.

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
PAYLOR, LARRY E
111 RIVERSIDE AVE
JACKSONVILLE, FL 00000

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
HASKELL, PRESTON H
111 RIVERSIDE AVE
JACKSONVILLE, FL 00000

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

S
VANDERGRIFF, C. EDWARD
111 RIVERSIDE AVE
JACKSONVILLE, FL 00000

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
OSTERMAN JR, PETR R
111 RIVERSIDE AVE
JACKSONVILLE FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☒ Change ☐ Addition

Zip Code = 32202

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

Zip Code = 32202

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

Zip Code = 32202

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☒ Change ☐ Addition

Osterman, Jr., Peter R

Zip Code = 32202

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), 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 addition.

SIGNATURE:

Peter R. Osterman, Jr., Vice President

1/16/95

(904) 791-4500