Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90025 019 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Corporation Name

JERRY BYRD, INC.

Principal Place of Business

Mailing Address



15451 SWEETWATER COURT, SE 7082 GARNADA LAKES DR FT MYERS FL 33912 FT MYERS FL 33912 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 06/16/1981 4. FEI Number Applied For 2. Principal Place of Business OAK Cove Rd 59-2118903 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 8. This corporation owes the current year Intangible ☐ Yes □No Personal Property Tax. 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent BYRD, JERRY 82 Street 7082 GARNADA LAKES DR FT MYERS FL 33912 83 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 647,0507 Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13 Change ☐ DELETE TITLE 1.1 TITLE BYRD, JERRY 1.2 NAME NAME 7082 GARNADA LAKES DR STREET ADDRESS 1.3 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE 2.1 TITLE TITLE BYRD. DELORIS 2.2 NAME NAME 7082 GARNADA LAKE DR 2.3 STREET ADDRESS STREET ADDRESS FT MYERS FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-STi ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 5.1 TITLE (TITLE The South 5.2 NAME NAME 5.3 STREET ADDRESS Links Horas STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 attachment with an address, with all other like empowered. Block 12 or Block 13 if changed, or on a

6.4 CITY-ST-ZIP

SIGNATURE:

CR2E034 (11/98)