

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F80342** (1)

1. Corporation Name

JAMES K. CROFT, INC.



Principal Place of Business

**1324 S. 14TH STREET
FERNANDINA BEACH FL 32034
US**

Mailing Address

**1324 S. 14TH STREET
FERNANDINA BEACH FL 32034
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 **P.O. Box 1527**

22 City & State

27 **Fernandina Bch, Fl.**

24 Zip

Country

29 **32035**

Country

30 **Nassau**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/07/1982

3a. Date of Last Report

04/19/1995

4. FEI Number

59-2193330

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**CROFT, JAMES K.
1324 S. 14TH STREET
FERNANDINA BEACH FL 32034**

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 of Registered Agent (if registered agent is not the same as the corporation's officer or director)

Signature of Registered Agent (if registered agent is not the same as the corporation's officer or director)

DATE

12. OFFICERS AND DIRECTORS

TITLE **V** ☐ DELETE
NAME **CROFT II, JAMES K.**
STREET ADDRESS **1381 CHESTER RD**
CITY-ST-ZIP **YULEE FL**

TITLE **TS** ☒ DELETE
NAME **WELSH, SANDRA**
STREET ADDRESS **731 MOURNING DOVE**
CITY-ST-ZIP **FERNANDINA BEACH FL**

TITLE **PTS** ☐ DELETE
NAME **CROFT, JAMES K.**
STREET ADDRESS **1324 S. 14TH STREET**
CITY-ST-ZIP **FERNANDINA BEACH 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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **32097**

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

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

**000001818110
-05/13/96--01027--011
***200.00**

SIGNATURE:

James K. Croft

4/29/96

(904)261-9546

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Day

Daytime Phone #

CR2E034 (12/95)