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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

DOCUMENT # F80855

1. Corporation	Name									
J & A MAINTENANCE, INC.					İ					
					ļ	L CREMEN AND TRANSPORTER STATE CONTRACTOR	ALLER CLERK I	LIBUL BEGUL GUR	UL CULUU LOCA	
Principal Place of Business Mailing Address						1 100 1100 1101 1111 1101 1111 1111 1111 1111			,,, 0,0,, ,00,	
6301 US 27 HWY S 814 ASTON MARTIN RD										
SEBRING FL 33871 SEBRING FL 33872						DO NOT WRITE IN THIS SPACE				
US US					ŀ	3. Date Incorporated or Qualifed				
					1	05/11/1982			}	
2. Principal Pl	ace of Business	2a. Mailing Address	_			4. FEI Number	,	Appl	ied For	
21		26				. 59-2192087		_ Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$	8.75 Ad		
22		27				3. Certificate of Glatus Desired		Fee Req	uired	
City & State	9	City & State				6. Election Campaign Financing		\$5.00 M		
23		28	_			Trust Fund Contribution		Added to	Fees	
Zip	Country	Zip	Countr	ry		8. This corporation owes the current y		ible	/	
24	25		30			Personal Property Tax.			ýNo No	
	9. Name and Address of Curren	t Registered Agent		4		10. Name and Address of New Regis	tered Age	ent -		
LHII	IOSEDH A		8	1 Name						
HILL, JOSEPH A 814 ASTON MARTIN RD.			8:	2 Street A	Addres	ress (P.O. Box Number is Not Acceptable)				
SEBRING FL 33870			8	3					_	
								-1 -1 -	-	
			8	4 City			FL	35 Zip Co	ode	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statut	es, the abo	ve-named o	corpor	ation submits this statement for the purp	ose of cha	inging its re	egistered	
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was at	utnorized b	v the corpo	ration'	's board of directors. I hereby accept the	appointm	ent as regi	stered	
	II Jamiliai Witi, and accept the obliga	don's or, occurred the control of	.,							
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE	: Registered Ag	jent signature re	equired w		ATE			
12.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICE		DIRECTOR Change	Addition	
TITLE	STD	☐ DELETE	1.1 TITLE	•	- (1)	LLIANN		_ Change	☐ Addition I	
NAME	HILL, ANN		1.2 NAME		щ	+ Aston MARtin DR	•			
STREET ADDRESS	2729 U.S. 27 SOUTH		1.3 STRE	ET ADDRESS	21	7 1/2/0/	2			
CITY-ST-ZIP	SEBRING FL		1.4 CITY-	- 1	S	PRING FL 3387		<i></i>	Addition	
TITLE	PD	☐ DELETE	2.1 TITLE		1	III Theody A.		Change	Madigon	
NAME	HILL, JOSEPH A		2.2 NAME	E	47	WASTER MARTIN	DR,			
STREET ADDRESS	2729 U.S. 27 SOUTH		2.3 STRE	ET ADDRESS	6		\$ጸባሪ	a		
CITY-ST-ZIP	SEBRING FL		2.4 CITY		3,	ERRING, Fr 3:			Addition	
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STREET ADDRESS			B .	ET ADDRESS			•			
CITY-ST-ZIP			4.4 CITY-					Change	Addition	
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NAME			5.2 NAME					•		
STREET ADDRESS				ET ADDRESS					,	
CITY-ST-ZIP		☐ DELETE	5.4 CITY 6.1 TITLE			·	· ·	Change	☐ Addition	
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELE!E	6.2 NAME					_ onango		
NAME			1	į						
CTREET ADDRESS	i .		■ 0.3 S Kb	ET ADDRESS	1					

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

6.4 CITY-ST-ZIP

STREET ADDRESS