FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000004765 (3)

1. Corporation Name

JACK WINTERS ENTERPRISES, INC.

Principal Place of Business	Mailing Address
C/O RICK SATURN 433 PLAZA REAL SUITE 275 BOCA RATON FL 33432	C/O RICK SATURN 433 PLAZA REAL SUITE 275 BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/14/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 36-3091401 ☐ Applied For ☐ Not Applicable
21 4205 S. FEDERAL HWY	26 4205 S. FEDERAL HWY	
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
23 City & State: STUART, FL	28 City & State: STUART, FL	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
24 Zip: 34997 25 Country: USA	29 Zip: 34997 30 Country: USA	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SATURN, RICK A 433 PLAZA REAL, STE 275 BOCA RATON FL 33432	81 Name: JACK B WINTERS 82 Street Address (P.O. Box Number is Not Acceptable): 4205 S. FEDERAL HWY 83 84 City: STUART FL 85 Zip Code: 34997

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] JACK B. WINTERS (Name of person(s) typed or printed) 4/19/95 (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	11 TITLE	JACK WINTERS PRESIDENT ☒ Change ☐ Addition
NAME	WINTERS, JACK B	12 NAME	
STREET ADDRESS	433 PLAZA REAL STE 275	13 STREET ADDRESS	2295 SW ESSEX CT
CITY ST ZIP	BOCA RATON FL	14 CITY ST ZIP	PALM CITY FL 34990
TITLE	V	21 TITLE	VICE PRES. ☒ Change ☐ Addition
NAME	CLEMENTS, CRAIG	22 NAME	F. CRAIG CLEMENTS
STREET ADDRESS	433 PLAZA REAL STE 275	23 STREET ADDRESS	2827 SW BRIGHTON WAY
CITY ST ZIP	BOCA RATON FL	24 CITY ST ZIP	PALM CITY, FL 34990
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that this information supplied with this filing is voluntarily furnished and 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 Blocks 13 of this report, or on an attachment with an addition.

SIGNATURE: [signature] 4/20/95 (Date) 4072870801 (Daytime Phone #)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0260100 CP