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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F96000003511 (0) CURT J & J ENTERPRISES, INC. Principal Place of Business Mailing Address 4040 SE 84TH LN RD 4040 SE B4TH LN RD OCALA FL 34480 OCALA FL 34480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1996 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 56-1072155 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CHAPPELKA, CURT J 4040 SE 84TH LN RD Street Address (P.O. Box Number is Not Acceptable) 82 OCALA FL 34480 63 84 City 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 registored agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition TITLE DELETE 1.1 TITLE CHAPPELKA, CURT J NAME 1.2 NAME 4040 SE 84TH LN RD STREET ADDRESS 1.3 STREET ADDRESS **OCALA FL 34480** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE CHAPPELKA, MARILYN B NAME 2.2 NAME 4040 SE 84TH LN RD STREET ADDRESS 2.3 STREET ADDRESS OCALA FL 34480 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition CHAPPELKA, JAMES A NAME 3.2 NAME 4040 SE 84TH LN RD STREET ADDRESS 3.3 STREET ADDRESS **OCALA FL 34480** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

14. Thereby 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.

6.3 STREET ADDRESS 6.4 CiTY - ST - ZIP

STREET ADDRESS

CITY-ST-ZIP

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Apr 23 1998 8:00am