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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700000037

J.P. JAMES & CO., INC.

1999

OIL OF WALLO OF OOT INTO		
Principal Place of Business	Mailing Address	
ACC CLICCTAILT CT	27250 BIDGE LAKE CT	

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90026 020 ***150.00



105 CHESTNUT S		27250 RIDGE LAKE CT.							
NEEDHAM MA 021	194	BONITA SPRINGS FL 34134				DO NOT WRITE	E IN THIS SPAC	Œ	
						3. Date Incorporated or Qualifed			
						01/02/1997			
2. Principal Plac	ce of Business	2a. Mailing Address			. ,	4. FEI Number		App	lied For
21		26 26086 FAW.	NUDOL	o Coi	wt	04-2636674		Not	Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		•		# Continue of Status Deginal	□ \$8	3.75 A	dditional
22		27				5. Certifcate of Status Desired		Fee Red	quired
City & State		City & State		ا سر	,	6. Election Campaign Financing	□ \$	5.00	May Be
23		28 DONITA SPRIN	165.	PL		Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Countr		- 0	8. This corporation owes the currer			
24	25	29 34/34 3	0	U:		Personal Property Tax.	Y		No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered Agen	t	
144456			81	Name		JAMES JIMM	ر کو رہ		
	S, JIMMY P		82	Street	Addres	s (P.O. Box Number is Not Accepted			
	RIDGE LAKE CT.					26086 FAWNING	200 C	00R	·Z
BONIT	A SPRINGS FL 34134		83	3					
			84	City	1		85	Zip C	ode
	0	4		1 ' '	[D	NITA PORINGS	FI I	34	ソコム
11. Pursuant to	the provisions of Sections 607.0502 istered agent, or both, in the State of familiar with, and accept the obligation	and 607.1508, Florida Statutes	the abov	e-named	corpora	ation submits this statement for the p	urpose of chang	jing its r	egistered
office or reg	istered agent, or both, in the State of familia, with and accept the obligation	Floriga. Such change was aut ns of. Section 607.0805. Florid	ponzed/by la Statute	the corpo	oration	s board of directors. I hereby accept	ше арролише	it as icy	istered
		V -/F /	/ K		mmi	u l lames	1-5 DATE	-99	7
SIGNATURE	gnature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	egistered Age	nt signature r	required wi	men reinstating)	DATE		<u> </u>
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFI			
TITLE [DPT /	☐ DELETE	1.1 TITLE		D	MOS, JIMMY P 186 FAWNWOOD COL	[X]C	hange	☐ Addition
NAME	JAMES, JIMMY P		1.2 NAME		JA	mes, Limmy	set.		
STREET ADDRESS 2	27250 RIDGE LAKE CT.		1.3 STREE	T ADDRESS	260	386 PAWNWOOD CO			Ì
CITY-ST-ZIP	BONITA SPRINGS FL 34134		1.4 CITY-5	ST-ZIP	Bo	NITA SPRINGS, FL	34134	<u>. </u>	
	DS	☐ DELETE	2.1 TITLE					hange	☐ Addition
NAME .	JAMES, BETTY		2.2 NAME		Ta	mes Betty 086 FAWNWOOD (
I .	27250 RIDGE LAKE CT.		2.3 STREE	TADDRESS	26	086 FAWNWOOD (OURT		
	BONITA SPRINGS FL 34134		2. 4 CITY-	ST-ZIP	Bo	INITA SPRINCE, FL	34134		
TITLE		☐ DELETE	3.1 TITLE			 /		hange	☐ Addition
NAME			3.2 NAME						Ì
STREET ADDRESS			3.3 STREE	T ADDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					change	Addition
NAME			4. 2 NAME	Ī					ł
STREET ADDRESS			4 3 STREE	T ADDRESS					ļ
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
TITLE		DELETE	5.1 TITLE					hange	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				_	
TILE	-	☐ DELETE	6.1 TITLE			-		hange	Addition
NAME			6.2 NAME]
STREET ADDRESS			6.3 STREE	T ADDRESS					
SIREEI AUUKESS			0.4.000						

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 supplemental annual report is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an on or othe receiver or trustee supplemental that I am an or or or or an attackment with an address, with all other like empowered. 14. I hereby certify that the information indicated on this annual report of sofficer or director of the corporation Block 12 or Block 13 if changed, or

SIGNATURE