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

**FILED** Mar 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F9700001548 (3) JD SPECIALTIES, INC. Principal Place of Business Mailing Address 29575 ONO BLVD. 29575 ONO BLVD. ORANGE BEACH AL 36561 **ORANGE BEACH AL 36561** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/26/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 63-1117876 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes Yes 25 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent JOHNSON, ERNEST Name NO. 9, CHATEAU RD. Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY BEACH FL 32413 63 84 City B5 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 nigistered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE DUKE, JANICE K 1.2 NAME NAMI CR2E034 29575 ONO BLVD. 1.3 STREET ADDRESS STREET ADDRESS **ORANGE BEACH AL 38561** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE DUKE, R. WAYNE 2.2 NAME NAME 29575 ONO BLVD. STREET ADDRESS 2.3 STREET ADDRESS **ORANGE BEACH AL 36561** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE STORY, PAM 3.2 NAME NAME 29575 ONO BLVD. STREET ADDRESS 3.3 STREET ADDRESS **ORANGE BEACH AL 36561** CHTY - ST - 7tP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP ☐ Change DELETE Addition TITLE 5.1 TITLE 5.2 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. officer or director of the 60 Block 12 or Block 13 if cha

61 TITLE

62 NAME

5.3 STREET ADDRESS

**63 STREET ADDRESS** 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Janice K. Duke

DELETE

3/17/98

(334) 980-5840

Change

\_\_ Addition