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

**PROFIT CORPORATION ANNUAL REPORT** 

**1998** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700003057 (3)

JAYCOR, INC.

FILED May 14 1998 8:00am Secretary of State

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51-1-15					}	<b>u</b> 1140 <b>i</b> 1140 i 1447 i 1444 i 1444
Principal Place of Business Mailing Address						
9775 TOWNE CENTRE DRIVE 9775 TOWNE CENTRE DRIVE		VE				
SAN DIEGO CA 82121 SAN DIEGO CA 92121				DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					06/12/1997	
2. Principal Pi	ace of Business	2a. Mailing Address		<del></del>	4. FEI Number	Applied For
26				95-2936834	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
27				6. Certificate of Status Desired	Fee Required	
City & State				6. Election Campaign Financing	\$5.00 May Be	
23	<del></del>	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country		8. This corporation owes or has paid the cu	_ ` _ `
24	25 9. Name and Address of Current		30	<del></del>		Yes No
		Hegistered Agent	81	Name	10. Name and Address of New Registered	Agent
	CORPORATION SYSTEM		61	Ivanie		
	NO SOUTH PINE ISLAND ROAD		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
104	INTATION FL 33324		83			
			83			•
			84	City	FL	85 Zip Code
41 Pursuant t	to the provisions of Sections 607 0502	and 607 1508 Florida Statutos	e the abov	a-named co		
office or re	egistered agent, or both, in the State of	Horida Such change was at	thorized b	the corpora	orporation submits this slatement for the purpose of ation's board of directors. I hereby accept the app	pointment as registered
1	m familiar with, and accept the obligati	ions of, Section 607,0505, Flor	ida Statute	S.		
SIGNATURE	Signature, typed or printed name of registered agout	and title classic abir (NOTE	Benistered Au	ent Signature regi	quired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD	DELETE	11 TITLE			☐ Change ☐ Addition
NAME	WENAAS, ERIC P		12 NAME			
STREET ADDRESS	9775 TOWNE CENTRE DRIVE		1.3 STHEET	ADDRESS		
CITY-ST-ZIP	SAN DIEGO CA 92121		1.4 C/TY-1	51 - ZIP		
TITLE	V	DELETE	2.1 TITLE			Change Addition
NAME	Johnson, P R		2.2 NAME	- 1		
STREET ADDRESS	9775 TOWNE CENTRE DRIVE		2.3 STREE	ADDRESS		
CITY-ST-ZIP	SAN DIEGO CA 92121		2. 4 CITY-	ST-7IP		
TITLE	8	DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	BIDWELL, DOROTHY K		3.2 NAME		<b>.</b>	
STREET ADDRESS	9775 TOWNE CENTRE DRIVE		3.3 STREET	ADDRESS		
CITY-ST-ZIP	SAN DIEGO CA 92121		3.4. CITY - ST - ZIP			
TITLE	D	☐ DELETE	4.1 711LE			Change Addition
NAME	FOSTER, JOHN S JR		4. 2 NAME			ļ
STREET ADDRESS	9775 TOWNE CENTRE DRIVE		4 3 STREET	ADDRESS		ļ
CITY-ST-ZIP	SAN DIEGO CA 92121		4.4 CITY-ST-ZIP			
TITLE	D	DELETE	5.1 TITLE			Change Addition
NAME	HEEBNER, DAVID R		5.2 NAME			
STREET ADDRESS	9775 TOWNE CENTRE DRIVE		5.3 STREET ADDRESS			
CITY-ST-ZIP	SAN DIEGO CA 92121		5.4 CITY - ST- ZIP			
TITLE	U	DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME				1		
	STUHMILLER, JAMES H		6.2 NAME			_ , _
STREET ADDRESS	STUHMILLER, JAMES H 9775 TOWNE CENTRE DRIVE SAN DIEGO CA 92121	<u></u> :		ADDRESS		

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.