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 # G04624

JIM ROGERS MANAGEMENT, INC.

	FILED
Jan 23	1998 8:00am
Secre	etary of State

|--|

Principal Place	of Business	Mailing Address						
311 CARLYLE BLVD 311 CARLYLE BLVD								
RUSKIN FL 33570 RUSKIN FL 33570					DO NOT WRITE IN THIS SPACE			
U\$ U\$					3. Date Incorporated or Qualified			
		La Victoria Addition			10/11/1982			
2. Principal Place of Business 2s. Mailing Address				4. FEI Number		olied For		
21 26					59-2223755		Applicable	
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Red		
27							<u> </u>	
City & State	•	City & State			6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added to		
Zip	Country	Zip	Country		This corporation owes or has paid the corporation owes or has paid the corporation.			
24	25		30		Personal Property Tax due June 30.		No	
	g. Name and Address of Curre	ent Registered Agent	-		10. Name and Address of New Registers	a Agent		
- TAT	TERSALL, PETER		81	Name				
333	N.FERN CREEK AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)			
ORI	LANDO FL 32802							
			83]	
			84	City		85 Zip C	ode	
			64	City	F		.000	
11. Pursuant I	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above	named cor	rporation submits this statement for the purpose	of changing its	registered	
l office or re	egistered agent, or both, in the Stat m familiar with, and accept the obli-	e of Florida. Such change was a	uthorized by	the corpora	ation's board of directors. I hereby accept the a	ppointment as r	egistered	
_	III lattialar with and accept the com-	gations of, bection bor.cooc, inc	rida Otatatoa.					
SIGNATURE	Signature, typed or printed name of registered a	nent and title if applicable (NOTE	Registered Agen	t signature requ	uired when reinstating) DATE			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	S IN 12	
TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	ROGERS, JAMES A	1.2 N						
STREET ADDRESS	311 CARLYLE BLVD		1.3 STREET A	NDDDESS				
	RUSKIN FL							
CITY-ST-ZIP		DELETE	1.4 CITY-ST 2.1 TITLE	- 212		Change	Addition	
TITLE	-							
NAME	1000000 0000000		2.2 NAME					
STREET ADDRESS	V.02 D.0001211 1.000		2 3 STREET A	ADDRESS			1	
CITY+ST-ZIP	MARIETTA GA		2 4 City-S	r-ZIP		Ohana	T Addition	
TITLE	VP	DELETE 31TH				Change	Addition	
NAME	ROGERS, CLINTON A		3.2 NAME					
STREET ADDRESS	311 CARLYLE BLVD		3.3 STREET A	ADDRESS				
CITY-ST-ZIP	71001111110		3.4. CITY - ST	-ZIP				
TITLE			4.1 TITLE			Change	☐ Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST	- 7IP				
TITLE		DELETE	5 1 THILE			Change	Addition	
NAME			5.2 NAME					
]			5.3 STREET	ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP	-	DELETE	5.4 CITY- ST	- 417		Change	Addition	
TITLE		LT OFFEIG	6.1 TITLE			L. Johnson		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST	- ZIP				
14 Lhereby c	ertify that the information supplied	with this filing does not qualify fo	r the exempt	ion stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that the	Intermation	

I nereby ceruity that the information supplied with this ruling does not quality for the exemption stated in Social 19.07(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.