

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G15636 (5)**

1. Corporation Name

JRD., INC.



Principal Place of Business

Mailing Address

4779 WOOD DUCK CR
VERO BEACH FL 32967
US

PO BOX 64442
VERO BEACH FL 32964
US

3. Date Incorporated or Qualified **12/23/1982** 3a. Date of Last Report **05/10/1995**

2. Principal Place of Business
21 Suite, Apt. #, etc
22 **2202 6th Ave. S.E.**
23 **VERO BEACH, FL.**
24 **32962** 25 **USA**

4. FEI Number **59-2246353**
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SPINELLI EASTON, JANICE
4779 WOOD DUCK CIRCLE
VERO BEACH FL 32967

10. Name and Address of New Registered Agent
81 Name **SPINELLI EASTON, JANICE**
82 Street Address (P.O. Box Number is Not Acceptable) **2202 6th Ave. S.E.**
83
84 City **VERO BEACH** 85 Zip Code **FL 32962**

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 607.0503, Florida Statutes.

SIGNATURE *Janice Spinnelli Easton* Date **6-20-96**

| 12. OFFICERS AND DIRECTORS | | DELETE |
|----------------------------|------------------------------|--------------------------|
| TITLE | PD EASTON, JANICE | <input type="checkbox"/> |
| NAME | 7411 PERIWINKLE DRIVE | |
| STREET ADDRESS | SARASOTA, FL 00000 | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | Change | Addition |
|---|----------------------------|-------------------------------------|--------------------------|
| 1.1 TITLE | PD EASTON JANICE | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 1.2 NAME | 2202 6th Ave S.E. | | |
| 1.3 STREET ADDRESS | VERO BEACH FL 32962 | | |
| 1.4 CITY-ST-ZIP | | | |
| 2.1 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.2 NAME | | | |
| 2.3 STREET ADDRESS | | | |
| 2.4 CITY-ST-ZIP | | | |
| 3.1 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.2 NAME | | | |
| 3.3 STREET ADDRESS | | | |
| 3.4 CITY-ST-ZIP | | | |
| 4.1 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.2 NAME | | | |
| 4.3 STREET ADDRESS | | | |
| 4.4 CITY-ST-ZIP | | | |
| 5.1 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.2 NAME | | | |
| 5.3 STREET ADDRESS | | | |
| 5.4 CITY-ST-ZIP | | | |
| 6.1 TITLE | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.2 NAME | | | |
| 6.3 STREET ADDRESS | | | |
| 6.4 CITY-ST-ZIP | | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Janice Spinnelli Easton* Date: **6-20-96** 561-527-0917

CR2E034 (3/96)