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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # G19930
1. Corporation Name

(8)

J & B MANAGEMENT COMPANY OF THE PALM BEACHES, IN C.

SIGNATURE AND TYPED OF

Principal Place of Business

2. Principal Place of Business

21 6975, MILITARY Suite, Apt #. etc.

DAKE WORTH FL 33483

City & State

Mailing Address

300 NW 82ND AVE

2a. Mailing Address

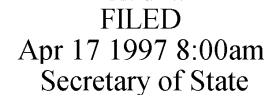
City & State

PLANTATION FL 33324-1845

Suite, Apt. #, etc.

US

26





3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

04/18/1996

3. Date incorporated or Qualified

01/24/1983

59-2417366

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

23 LAK	E WORTH FL 28		Trust Fund Contribution Added to Fees	
7	Country Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,	
24 22'	7 25 77.00 0 25	····	Florida Statutes Yes You No	
	9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
	REW L. SIEGEL	81 N	ame .	
300 NW 82ND AVE SUITE 412			82 Street Address (P.O. Box Number is Not Acceptable)	
PLA	NTATION FL 33324	83		
		B4 C	ty FL 85 Zip Code	
office or re	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the egistered agent, or both, in the State of Florida, Such change was authour familiar with, and accept the obligations of, Section 607.0505, Florida	rized by the	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Superiore: Nyr. 1 or period name of registered are x and tills if applicable. (NOTE Rep.	interest Appella	inaliure required when reinstaling) DATE	
12.		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PILE		1.1 TITLE	☐ Change ☐ Addition	
NAME (PROSEN, JAMES D.	1.2 NAME		
STREET ADDRESS	12386 W HALL PLACE	1.3 STREET ADD	RESS	
CHY-ST-ZIP	WELLINGTON EL	1.4 CITY-ST-ZI		
TITLE		2.1 TITLE	Change Addition	
NAME		2.2 NAME		
STREET ADDRESS		23 STREET ADD	RESS 1997	
CITY+S1-ZIP	COOKEVILLE TN	2. 4 CITY-ST-2	P .	
TITLE	☐ DELETE	3.1 TITLE	Change Addition	
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADD	RESS	
CITY_S1-ZiP		3 4. CITY - ST - Z	s	
THE	☐ DELETE	4.1 TITLE	Change Addition	
NAME	j	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADD	RESS	
CITY-S1-70		4.4 CITY - ST - ZI		
THUE	DELÊTE DELÊTE	51 TITLE	Change Addition	
NAME	j.	5.2 NAME		
STREET ADDRESS	1	5.3 STREET ADD	RESS	
CITY - ST-ZIP		5.4 CITY-ST-ZI		
TITLE	C DELETE	6.1 TITLE	Change [] Addition	
NAMI	1	6.2 NAME		
STREET ADDRESS	J	6.3 STREET ADD	RESS	
City-St-ZiP		6.4 CITY-ST-ZI		
14. I do hereb informatio I am an of	by certify that the information supplied with this filing does not qualify for n indicated on this annual report or supplemental annual report is true a flicer or director of the corporation or the receiver or trustee empowered	the exemp ind accurat to execute	ion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the and that my signature shall have the same legal effect as if made under oath; tha this report as required by Chapter 607, Florida Statutes; and that my name	

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR