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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H07989

(7)

FILED Apr 22 1997 8:00am Secretary of State

1. Corporation Name J.R. CRAIN, INC. Principal Place of Business 3777 N JOHN YOUNG PKWY 4300 L. B. MCLEOD RD. ORLANDO FL 32804 ORLANDO FL 32811-5696								
US		US			3. Date Incorporated or Qualified 06/14/1984	- (ate of Last F 20/1996	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			oplied For
21	B. A	26			59-2440328			ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional aguired
City & Stat	0	City & State			6. Election Campaign Financing		·	May Be
23		28			Trust Fund Contribution			to Fees
- Z.p	Country	Zip	Country		8. This corporation has liability for			. 199.032.
4	25 9. Name and Address of Cur	rent Registered Agent	30		Florida Statutes 10. Name and Address of New Ro	Yes		
CDA	VN, J. R	Tent registated Agent	81	Name	10, Hamo Bila Adelbas of Hear I	Biataion	- Mariti	
	7 N JOHN YOUNG PKWY		82	Street Addr	ress (P.O. Box Number is Not Accepta	hle)		····
	ANDO FL 32804				, see (. see see see see see see see see see s		····	
			83					
			84	City		FL	85 Zip	Code
								to
office or i	registered agent, or both, in the St	tate of Florida. Such change wa	s authorized by	the corporat	poration submits this statement for the tion's board of directors. I hereby acce	purpose o	of changing it pointment as	is registered registered
office or i agent. Fa	to the previsions of Sections 607.1 registered agent, or both, in the St am familiar with, and accept the ob-	tate of Florida. Such change wa	s authorized by	the corporat	poration submits this statement for the tion's board of directors. I hereby acce	purpose o	of changing i pointment as	is registered registered
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4. I do hereby certify that the information supplied with this filling 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 supplied ental 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 of their effect or trustee propowered 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE

PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

Daytime Phone # 009 | 137