

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90107 013 ***150.00

DOCUMENT # H34356

1. Corporation Name
JERIL R. CLENNEY, INC.

Principal Place of Business

699 N HOLLAND TN RD
WAUCHULA FL 33873
US

Mailing Address

P.O. BOX 850
699 N. HOLLAND TOWN RD
WAUCHULA FL 33873
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/17/1984

4. FEI Number

59-2487885

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 **699 N Holland TOWN RD**
Suite, Apt. #, etc.

2a. Mailing Address

26 **699 N Holland TOWN RD**
Suite, Apt. #, etc.

22 **WAUCHULA**
City & State

27 **WAUCHULA**
City & State

23 **WAUCHULA** **FL**
Zip Country

28 **WAUCHULA** **FL**
Zip Country

24 **33873** 25 **HARDEE**

29 **33873** 30 **HARDEE**

9. Name and Address of Current Registered Agent

CLENNEY, JANICE B.
699 N. HOLLAND TOWN RD
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81 Name **JANICE B. CLENNEY**
82 Street Address (P.O. Box Number is Not Acceptable)
699 N Holland Town Rd
83
84 City **WAUCHULA** **FL** 85 Zip Code **33873**

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 607.0505, Florida Statutes.

SIGNATURE

Janice B. Clenney

JANICE B. CLENNEY

1-4-98

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

12. ☐ DELETE

TITLE **VPD**
NAME **CLENNEY, JERIL R.**
STREET ADDRESS **699 HOLLANDTOWN ROAD**
CITY-ST-ZIP **WAUCHULA FL**

13. ☐ DELETE

TITLE **PSD**
NAME **CLENNEY, JANICE B.**
STREET ADDRESS **699 HOLLANDTOWN ROAD**
CITY-ST-ZIP **WAUCHULA FL**

14. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

15. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

16. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

17. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

PSTD
CLENNEY, JANICE B.
699 N Holland Town Rd
WAUCHULA FL 33873

☐ Change

☒ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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, with all other like empowered.

SIGNATURE

Janice B. Clenney **JANICE B. CLENNEY**

Date

Daytime Phone #

1-4-98 941 773-6909

CR2E034 (1/98)