1       26       Suite, Apt. #, etc.       26       Suite, Apt. #, etc.       50       Suite, Apt. #, etc.	PROFIT CORPORATI ANNUAL REP <b>1997</b>			FLORIDA DEPA Sandra Socret	ARIMENT OF STATE <b>B. Mortham</b> tary of State CORPORATIONS	Apr 29 Secre		8:00ai of State
2251 HTTLF PMES LAVE US       PO DOX 817 ASHEDOND NC 27204 C817         2       Philopal Place of Business       2e. Maling Address         2       Philopal Place of Business       2e. Maling Address         3016, Ap.1, #. etc.       2e. Maling Address       4. ELI Number         3016, Ap.1, #. etc.       Suite, Ap.1, #. etc.       5. Certificate of Status Desired       Fee Required         City & State       City & State       City & State       6. Certificate of Status Desired       Sec. Data of Least Place of Status Desired       Fee Required         210       Country       211       State Address       6. Certificate of Status Desired       Sec. Data of Least Place of Least Pl	A & J SERVICE	COMPANY, INC.		· · ·				
Og/28/1985       Og/20/1985       Og/20/1996         21       Applied Face       State Appl	2254 WHITE PINES LANE ASHEBORO NC 27204		PO B	OX 817	0817			
Suite, Apt. 4, etc.       Suite, Apt. Apt. Apt. Apt. Apt. Apt. Apt. Apt.	<b>-</b>	ness	l	iling Address			······	Applied For
City & State       27       City & State       27       City & State       27       City & State       35.00 may be added to Fees         21p       Country       2rp       Country       2rp       Country       8. This corporation hesitability to financing       \$5.00 may be added to Fees         21p       Country       2rp       Country       8. This corporation hesitability to financing       \$5.00 may be added to Fees         4. UDAH, INFOLL A.       8. This corporation hesitability to financing       10.0 Marme and Address of New Registered Agent         JUDAH, INFOLL A.       61       Namo       82       Strept Address of New Registered Agent         JUDAH, INFOLL A.       61       Namo       82       Strept Address of New Registered Agent         Strept Address of New Registered agent or both, In the Stete of Florts State frame was addres date addres of our registered agent or both, In the Stete of Florts State frame was addres date addres of the outportation's board of orrectors. I hereby accept the oblightered agent agent corporation is board of orrectors. I hereby accept the oblightered agent agent agent accept to oblightered agent agent agent accept to oblightered agent agent agent accept accept accept to oblightered agent agent agent agent agent accept accept accept addres agent agent agent agent accept accept accept addres accept to oblightered agent agent agent agent accept accept addres accept addres accept addres accept ad	Sulte, Apt. #, etc.		Suil	le, Apt. #, elc.			\$	8.75 Additional
28         Trust Fund Contribution         Added to Foes           20         Country         21         Country         8. This corporation has liability for Intangible tax unders s. 199.032           20         20         30         Finis contraction has liability for Intangible tax under s. 199.032           6. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           JUDAH, VIROL A.         State Statutes         10. Name and Address of New Registered Agent         61           JUDAH, VIROL A.         State Statutes         62         Street Address (P.O. Box Number is Not Acceptable)           FORT MYERS FL 33901         64         City         FL         85         Zip Code           1. Pursuent to the provisions of Soctions 607 0502 and 607. 1508, Florida Statutes, the abreve named corporation is bard of directors. Thereby accept the appointment as register         gent. ant indivine with, and cacept the obligations of Soctions 607 0502, Florida Statutes         Statutes         Cott           INT St. 20         Office RS AND DIFIC CTORS         10         Cott         ADDITIONS/CHANGES TO OFFICERS AND DIFIC CTORS in 12           Int det mater with addition det per direct server days spectra traumation and anon directors. Thereby accept the obligations of Soctions 607 0502 and 100 Florida Statutes         ADDITIONS/CHANGES TO OFFICERS AND DIFIC CTORS in 12				/ & State	······			
25     29     30     Find a Statutes     In the operation of a statutes       9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       JUDAH, VRGL A.     61     Name     61     Name       JUDAH, VRGL A.     61     Name     62       Statutes     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       JUDAH, VRGL A.     61     Name       SUTE 301     62     Stratutes     10. Name and Address of New Registered Agent       FORT MYERS FL 33901     62     Stratutes     10. Name and Address of New Registered Agent       10. Pursuent to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registere       agent. I an tamilier with, and accept the oblightions of Socions 607 0508. Florida Statutes     10001. Florestered Agent		Country			Country			Added to Fees
JUDAH, VIRGIL A.       61       Name         State State       62       Street Address (P.O. Box Number is Not Acceptable)         FORT MYERS FL 33901       64       City       FL       65       Zip Code         1. Pursuant to the provisions of Soctions 607 0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its register of agent. I am familier with, and accept the obligations of. Section 607 0505, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment as register agent, and the obligations of. Section 607 0505, Florida Statutes.       PMIL Tegened Agent agent and the obligations of. Section 607 0505, Florida Statutes.         Agent. I am familier with, and accept the obligations of. Section 607 0505, Florida Statutes.       PMIL Tegened Agent a						Ftorida Statutes	Yes N	0
IGNATURE I grandure, typed or privace none of registered agent and late, if applicable.       (NOTE: Registered Agent Signature required when reinstating)       DATE         Description       OFFICE RS AND DIRE CTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Lit       DP       DELETE       11 IITLE       Change       Addition of the privace agent and late, if applicable.         NEE       DP       DELETE       11 IITLE       Change       Addition of the privace agent and late, if applicable.         Ite       DP       DELETE       11 IITLE       Change       Addition of the privace agent and late, if applicable.         Ite       DP       DELETE       11 IITLE       12 NAME       13 STREET ADDRESS         THALER, JAMES R.       12 NAME       13 STREET ADDRESS       14 CHY = ST-IP         Lite       D       DELETE       21 IITLE       Change       Addition of the privace agent and late, if applicable.         ReeT ADDRESS       224 WASHINGTON AVE.       23 STREET ADDRESS       23 STREET ADDRESS       24 CHY = ST-IP         Lite       DST       DELETE       21 IITLE       Change       Addition         ME RET ADDRESS       PEOPER, EUNICE J.       PEOPER, EUNICE J.       23 STREET ADDRESS       33 STREET ADDRESS         NY-ST-ZIP<	3949 EVANS SUITE 301							
2.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         TILE       DP       DELETE       11 ITLE       Change       Addi         MRET ADDRESS       724 WASHINGTON AVE.       13 STREEL ADDRESS       12 MANE       13 STREEL ADDRESS         TY-ST-ZIP       ELYRIA OH       14 CITY-ST-ZIP       Change       Addi         THALER, JOYCE       224 WASHINGTON AVE.       23 STREEL ADDRESS       224 WASHINGTON AVE.       23 STREEL ADDRESS         TY-ST-ZIP       ELYRIA OH       24 CITY-ST-ZIP       Change       Addi         TREET ADDRESS       224 WASHINGTON AVE.       23 STREEL ADDRESS       Change       Addi         TY-ST-ZIP       DELETE       31 ITLE       Change       Addi         MARE       PEPPER, EUNICE J.       32 STREEL ADDRESS       Change       Addi         TY-ST-ZIP       ASHEBORO NC       34. CITY-ST-ZIP       Change       Addi         MARE       DELETE       4. CITY-ST-ZIP	3949 EVANS SUITE 301 FORT MYER:	S FL 33901	2 and 607 1	508 Elorida Siati	83 84 City	······································	FL <sup>8</sup>	
AME       THALER, JAMES R.       12 NAME         THEET ADDRESS       724 WASHINGTON AVE.       13 STREE1 ADDRESS         ITV-ST-ZIP       ELYRIA OH       14 CIY-ST-ZIP         ITLE       D       DELETE       21 TITLE         AME       THALER, JOYCE       22 NAME         ITV-ST-ZIP       ELYRIA OH       14 CIY-ST-ZIP         ITVE       DELETE       21 TITLE         AME       THALER, JOYCE       23 STREET ADDRESS         ITV-ST-ZIP       ELYRIA OH       24 CIY-ST-ZIP         ITVE       DST       DELETE       31 TITLE         AME       PEPPER, EUNICE J.       32 NAME         P. O. BOX 817       N/A       33 STREET ADDRESS         ITV-ST-ZIP       ASHEBORO NC       34. CIY-ST-ZIP         AME       DELETE       31 TITLE         AME       DELETE       32 NAME         ITV-ST-ZIP       ASHEBORO NC       34. CIY-ST-ZIP         AME       DELETE       41 CIY-ST-ZIP         AME <td< th=""><th>3949 EVANS SUITE 301 FORT MYERS 1. Pursuant to the provis office or registered a agent. I am familiar w SIGNATURE</th><th>S FL 33901 sions of Sections 607 050 gent, or both, in the State /ith, and accept the oblige</th><th></th><th></th><th>83 84 City Jles, the above-named co authorized by the corpor. Torida Statutos.</th><th>rporation submits this statement for the ation's board of directors. I hereby acc</th><th>FL 81 e purpose of cha cept the appointr</th><th></th></td<>	3949 EVANS SUITE 301 FORT MYERS 1. Pursuant to the provis office or registered a agent. I am familiar w SIGNATURE	S FL 33901 sions of Sections 607 050 gent, or both, in the State /ith, and accept the oblige			83 84 City Jles, the above-named co authorized by the corpor. Torida Statutos.	rporation submits this statement for the ation's board of directors. I hereby acc	FL 81 e purpose of cha cept the appointr	
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TREET ADDRESS       6.3 STREET ADDRESS         TY-ST-ZIP       6.4 CITY-ST-ZIP         4.1 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	3949 EVANS SUITE 301 FORT MYER: 1. Pursuant to the provision office or registered a agent. I am familiar with agent. I am familiar with agent. I am familiar with software to the provision agent. I am familiar with software to the provision agent. I am familiar with software to the provision THE D THALE T	S FL 33901 sions of Sections 607.050 gent, or both, in the State rith, and accept the oblige of printed name of registered age OFFICE RS AND R, JAMES R. ASHINGTON AVE. A OH R, JOYCE ASHINGTON AVE. A OH R, EUNICE J. BOX 817 N/A BORO NC	nt and title if appl	hcaulo. (NO RS DELETE DELETE DELETE DELETE DELETE DELETE	83       84     City       Jies, the above-named construction of the corporation of the corpora	rporation submits this statement for the ation's board of directors. Thereby acc uired when reinstating)	FL     8       e purpose of characteristic purpo	Inging its registered ment as registered RECTORS IN 12 Change Addition Change Addition Change Addition Change Addition