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**Secretary of State** 

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PROFIT: " CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 **DOCUMENT # H57378**

1. Corporation Name

Principal Place of Business	rinoi od	JAST STSTEMS, INC.								
SADE SOUTHPOWN PRWY STE 20 STE	Principal Place	of Business	Mailing Address			-		8 8 8 1 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	ON SIBIL EVEN OF	914 B1811 (881
US  2. Principal Place of Business 2. A Mailing Audress 2. Principal Place of Business 2. A Mailing Audress 2. Principal Place of Business 2. A Mailing Audress 2. Evaluation of the State of Business 2. Subst. Apt. #, etc.  3. Subst. Apt. #, etc.	6430 SOUTHPOINT PKWY STE. 250		STE. 250				DO NOT W	RITE IN THIS	SPACE	
Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Siller, Apt. #, etc.   Sil						<del>-</del>	d			
Suite, Apt 8, etc.    Suite, Apt 8, etc.   Suite, Apt 8, etc.   South, A	2. Principal Pl	ace of Business	2a. Mailing Address				4, FEI Number		Apr	olied For
Suite Apt #, etc.   Suite Apt #, etc.   South Apt #, etc.   27   27   5. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Additional Fe	21						59-2520834		Not	. Applicable
City & State   City & Country   Zip	Suite, Apt. #, etc.		— · · ·				5. Certifcate of Status Desired	Œ _		
Added to Fees   Added to Fee		9	City & State				6. Election Campaign Financing	} . □	- \$5.00	May Be -
Zip Country 2	23		28				Trust Fund Contribution		Added to	Fees
15		Country	Zip	Country	/		8. This corporation owes the cu	rrent year Int		_
GIBBS, CHARLES R. 3518 HILLARD RD. JACKSONVILLE FL 32217  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City FL 85  Zip Code  11. Pursuant to the provisions of Sections 807,0502 and 607 1508. Fiorida Statutus.  84  City FL 85  Zip Code  11. Pursuant to the provisions of Sections 807,0502 and 607 1508. Fiorida Statutus.  84  City FL 85  Zip Code  11. Pursuant to the provisions of Sections 807,0502 and 607 1508. Fiorida Statutus.  85  SIGNATURE  Signature visit, and accept the obligations of, Section 607,0505, Florida Statutus.  85  SIGNATURE  Signature visit, and accept the obligations of, Section 607,0505, Florida Statutus.  85  SIGNATURE  CEO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CEO GIBBS, CHARLES R.  12. Name  GIBBS, CHARLES R.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CEO GIBBS, CHARLES R.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PO GIBBS, CHARLES R.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PO GIBBS, CHARLES R.  14. City ST. 2P  14. City FL 20  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PO GIBBS, CHARLES R.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  EXECUTIVE Vice President - Ev P Change Q Addition Daniel 5: Noe  23. STREET ADDRESS 24. STREET	24	25	29 3	io						∐No
GIBBS, CHARLES R. 3518 HILLARD RD. JACKSONVILE FL 32217  11. Pursuant to the provisions of Sections 807.0502 and 807.1508. Florida Statutus, the above-named corporation submits this statement for the purpose of changing its 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, 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 Statutuss.  SIGNATURE    12.		9. Name and Address of Current	t Registered Agent				10. Name and Address of New	Registered	Agent	
3518 HILLARD RD. JACKSONVILE FL 32217  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 open, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appartment as size appared and accept the obligations of, Section 607.0505, 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 appared and size appared to the corporation's board of directors. I hereby accept the appared to the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the appared to the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accepts the corporation's board of directors. I hereby accepts the corporation's board of directors. I hereby accepts the corporation's board o				81	Nam	е				
SIGNATURE   Sign			8:		Stree	t Addres	ss (P.O. Box Number is Not Accept	otable)		
11. Pursuant to the provisions of Sections 507.0502 and 607.1509, Florido 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.    TITLE CEO GIBBS, CHARLES R.   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.    NAME GIBBS, CHARLES R.   13. STREET ADDRESS   13. STREET A	JACK	SONVILLE FL 32217		83						
11. Pursuant to the provisions of Secilons 507 (502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and the state of Florida. Statutes agent. I am familiar with, and accept the obligations of, Section 607 (5058, Florida Statutes.)    SIGNATURE   Signature typed or printed name of registered agent and time if appacable				84	City			FL	85 Zip C	ode
12.	office or n agent. I a	egistered agent, or both, in the State (	of Florida. Such change was aut tions of, Section 607.0505, Florid	horized by ia Statute:	the cor s.	poration	is board of directors. Thereby acc	ept trie appor	changing its ntment as reg	registered listered
TITLE CEO   DELETE   1.1 TITLE   Frequency Vice President - EV P   Change   Addition    MAME GIBBS, CHARLES R.  STREET ADDRESS   3518 HILLIARD RD.  LOTY-ST-ZP   JACKSONVILLE FL   DELETE   2.1 TITLE    NAME GIBBS, DONNA L   STREET ADDRESS   3518 HILLIARD RD.  CITY-ST-ZP   JACKSONVILLE FL   DELETE   2.3 STREET ADDRESS   3.2 STREET ADDRESS    JACKSONVILLE FL   DELETE   JACKSONVILLE FL   DELETE   JACKSONVILLE FL    NAME GALUSHA, JOHN P   3.2 NAME   JACKSONVILLE FL   JACKSONVILLE FL   JACKSONVILLE FL    NAME GALUSHA, JOHN P   JACKSONVILLE FL   JACKSON					nt signatur	e required v			ID DIRECTO	DS IN 12
NAME GIBBS, CHARLES R.  STREET ADDRESS STAB HILLIARD RD.  STAB STREET ADDRESS STAB HILLIARD RD.  STAB STAB STAB STREET ADDRESS STAB HILLIARD RD.  STAB STAB HILLIARD RD.  STAB STAB HILLIARD RD.  STAB STAB STAB STAB STAB STAB STAB STAB		· · · · · · · · · · · · · · · · ·				<b> </b>				
STREET ADDRESS			C) SCILL					~ 6.71		
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STREET ADDRESS   CITY-ST-ZIP   Change   Change   Change   Change   Change   Change   City-ST-ZIP	i									
STREET ADDRESS   CITY-ST-ZIP   Change   Change   Change   Change   Change   Change   City-ST-ZIP					ST-ZIP	Fra	estim Vine President	- EVP	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  TITLE VPC OBLETE 31 TITLE VPC AME GALUSHA, JOHN P STREET ADDRESS CITY-ST-ZIP TITLE SVP TITLE SVP STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  TITLE SVP STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  TITLE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  AS A CITY-ST-ZIP JACKSONVILLE FL  AS A CITY-ST-ZIP ACKSONVILLE FL  AS TREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL  ADDRESS CITY-ST-ZIP ACKSONVILLE FL  ADDRESS CITY-ST-ZIP ADDRESS CI									_ • • • • • • • • • • • • • • • • • • •	**
CITY-ST-ZIP  JACKSONVILLE FL  TITLE  VPC  DELETE  31 TITLE  VPC  AME  GALUSHA, JOHN P  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  TITLE  SVP  DELETE  31 TITLE  32 NAME  33 STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  TITLE  SVP  DELETE  4.1 TITLE  ACITY-ST-ZIP  JACKSONVILLE FL  4.2 NAME  BEACH, R. D  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  TITLE  VP  SCHOOL AND ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  TITLE  VP  SCHOOL AND ADDRESS  STREET ADDRESS  CITY-ST-ZIP  JACKSONVILLE FL  TITLE  VP  DELETE  6.1 TITLE  VP  ADDLETE  6.2 NAME  STREET ADDRESS  813 BROOKSTONE COURT  BLOCKY  STREET ADDRESS  BLOCKY  BLOCKY  STREET ADDRESS  BLOCKY  BLOCKY  STREET ADDRESS  BLOCKY  BLOCKY  Addition  ADDRESS  BLOCKY  BLOCKY  ADDRESS  BLOCKY  B	1	T		22104000		. 113	& Greenridge Road			•
TITLE VPC DELETE 31 TITLE JAME GALUSHA, JOHN P STREET ADDRESS 2067 MATEFIELD RD.  OITY-ST-ZIP JACKSONVILLE FL  TOTLE SVP DELETE 4.1 TITLE  NAME BEACH, R. D STREET ADDRESS 2157 HAWKCREST DRIVE  GITY-ST-ZIP JACKSONVILLE FL  TOTLE VP NAME BEACH, R. D STREET ADDRESS 2157 HAWKCREST DRIVE  OUGHERTY, STEPHEN A STREET ADDRESS 32 NAME  STREET ADDRESS 4.4 CITY-ST-ZIP  TITLE VP NAME DOUGHERTY, STEPHEN A STREET ADDRESS 6.1 TITLE  TITLE VP NAME DOUGHERTY, STEPHEN A STREET ADDRESS 6.1 TITLE  TITLE VP NAME BILSKY, JAMES D JR. STREET ADDRESS 6.3 STREET ADDRESS  813 BROOKSTONE COURT  DELETE 3.1 TITLE 6.1 TITLE 6.2 MAME 6.2 NAME 6.3 STREET ADDRESS				-		Ta	bearill E1 3220	,		
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NAME   DOUGHERTY, STEPHEN A   5.2 NAME   5.3 STREET ADDRESS   SACKSONVILLE FL   5.1 TITLE   VP   DELETE   5.1 TITLE   Change   Addition   Change   Addition   Change   STREET ADDRESS   STREET			<b>©</b> DELETE	-	71-21	+			☐ Change	Addition
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	CITY-ST-ZIP	JACKSONVILLE FL		6.4 CITY-	ST-ZIP					

JACKSONVILLE FL CITY-ST-ZIP 14. 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 justee 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: