

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J09357 (1)

1. Corporation Name

JEWELL DISTRIBUTORS, INC.



Principal Place of Business

1224 MARDRAKE RD
DAYTONA BEACH FL 32114-5938

Mailing Address

1224 MARDRAKE RD
DAYTONA BEACH FL 32114-5938

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified
04/14/1986

3a. Date of Last Report
05/01/1995

4. FEI Number

59-2816589

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ARMSTRONG, RUSSELL F.
706 LINDENWOOD CIRCLE West
(PO BOX 1006, DAYTONA BEACH, FL 32015)
ORMOND BEACH FL 32074

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME DEROCO, STEPHANIE J.
STREET ADDRESS 1224 MARDRAKE RD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE V ☐ DELETE
NAME KINNEY, KAREN E.
STREET ADDRESS 30 RAVINE DR
CITY-ST-ZIP HAWTHORNE NJ

TITLE ST ☐ DELETE
NAME DEROCO, EDWARD J.
STREET ADDRESS 1224 MARDRAKE ROAD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE V ☐ DELETE
NAME DEROCO, ROSEANN
STREET ADDRESS 9 NORMANDY BLVD. W.
CITY-ST-ZIP MORRISTOWN NJ

TITLE V ☐ DELETE
NAME DEROCO, THOMAS
STREET ADDRESS 339 BLVD.
CITY-ST-ZIP KENILWORTH NJ

TITLE V ☐ DELETE
NAME DEROCO, EDWARD S.
STREET ADDRESS 813 COLONIAL ARMS RD.
CITY-ST-ZIP UNION NJ

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)