

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J13965 (5)

1. Corporation Name

BOWIE JACKSON TAX SERVICE, INC.



Principal Place of Business

323 E. BROUGHTON STREET
SAVANNAH GA 31401
US

Mailing Address

323 E. BROUGHTON ST.
SAVANNAH GA 31401

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

JACKSON, EDWARD P.
512 W. ADAMS STREET
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified

05/13/1986

3a. Date of Last Report

05/01/1995

4. FEI Number

58-1677431

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

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, typewritten or printed name of registered agent and date of signature

(If DFL Registered Agent Signature, type name of registered agent)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DOUGLAS, MARY B.
STREET ADDRESS 1925 E HENRY ST
CITY-STATE-ZIP SAVANNAH GA ☐ DELETE

TITLE VD
NAME RICE, CARLINE
STREET ADDRESS 6 ANTRIM ST.
CITY-STATE-ZIP PORT WENTWORTH GA ☐ DELETE

TITLE VD
NAME MITCHELL, ANNETTE
STREET ADDRESS 108 HOLIDAY DR.
CITY-STATE-ZIP SAVANNAH GA ☐ DELETE

TITLE TD
NAME CALDWELL, JANE
STREET ADDRESS 1202 HWY 80 E. STAR RT
CITY-STATE-ZIP TYBEE ISLAND GA ☐ DELETE

TITLE SD
NAME MILLS, ALMA
STREET ADDRESS 309 MONTCLAIR BLVD.
CITY-STATE-ZIP SAVANNAH GA ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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 or 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:

Jane Caldwell JANE CALDWELL

4/23/96

912/236-9830

CR2E034 (12/95)