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May 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J38818 (7)
1. Corporation Name
J. & J. SECURITY SERVICES CORPORATION

Principal Place of Business
2016 WOODLAND ST
NEW SMYRNA BEACH FL 32168
US

Mailing Address
LOCATION TRAIL: 2016 WOODLAND STREET
NEW SMYRNA BEACH FL 32168



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Same		26 Same		10/17/1986	04/26/1996
22 Suite, Apt #, etc.		27 Suite, Apt #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		59-2731874	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Country		Country		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
				Yes No Paid	

9. Name and Address of Current Registered Agent

PHYLLIS ANN JARVIS
2016 WOODLAND STREET
NEW SMYRNA BEACH FL 32168

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	JARVIS, ROBERT F JR.	
STREET ADDRESS	2016 WOODLAND DR.	
CITY-ST-ZIP	NEW SMYRNA FL 32168	
TITLE	ST	DELETE
NAME	JARVIS, PHYLLIS ANN	
STREET ADDRESS	2016 WOODLAND ST	
CITY-ST-ZIP	NEW SMYRNA FL 32168	
TITLE	VP	DELETE
NAME	KITSMILLER, JIM	
STREET ADDRESS	1025 CENTER STREET	
CITY-ST-ZIP	DELAND FL 32724	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	Change	Addition
1.2 NAME	WENDI JARVIS		
1.3 STREET ADDRESS	2016 WOODLAND ST.		
1.4 CITY-ST-ZIP	NEW SMYRNA, FL 32168		
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 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.

SIGNATURE:

Phyllis Jarvis / Phyllis JARVIS 4-30-97 904-426-6037

CR2E034 (9/96)