## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J48028

(1)

Mailing Address

JESSE'S SEAFOOD HOUSE, INC.

FILED											
May 16 1997 8:00	am										
Secretary of State	e										

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18187 ÜS HWY SUITE 660 CLEARWATER 1		18167 US HWY 19 N. STE. 660 CLEARWATER FL 34624-650 US	69			3. Date Incorporated or Qualified	3a. Date of Last	Report	7
						12/19/1986	05/01/1996		1
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	]
21		26				59-2764043		Vot Applicable	
Sulte, Apt.		Suite, Apt. #, etc.	:			5, Certificate of Status Desired	ж ,	Additional Required	
City & State	9	City & State	:			Election Campaign Financing Trust Fund Contribution		May Be d to Fees	-
Zip	Country 25	Zip 29	30	untry		8. This corporation has liability for in Florida Statutes	ntangible tax under Yes \(\Boxed{\omega}\) No	s. 199.032,	
	g. Name and Address of Current	t Registered Agent				10. Name and Address of New Reg	istered Agent		1
KELL	LEY, JOHNSON R			61	Name				1
1816	37 U.S. HWY. 19 N., STE. 660 ARWATER FL 34624		:	82	Street Ad	dress (P.O. Box Number is Not Acceptable	le)		}
, . 000	WINNER I C OTOLT			83					1
				84	City		FL	o Code	
office or re	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obtige	of Florida. Such change was a	authorize	d by	the corpor	rporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing I the appointment a	its registered as registered	
SIGNATURE									1
10	Signature, typed or printed name of registered ager OFFICERS AND	<del></del>		d Age	nt signature req	ulred when reinstating)	DATE	200 111 40	۲ٍ
TITLE	VT	DELETE	13. 1.1 T	ITI E		ADDITIONS/CHANGES TO OFFIC	Change		96/6
NAMÉ	JOHNSON, RICHARD C.		1.2 N		1			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10)
STREET ADDRESS	18167 US HWY 19 N., STE. 66	Λ			ADDRESS				CR2E034
CITY-ST-ZIP	CLEARWATER FL	•		ATY-SI					믮
TITLE	DP	DELETE	2.1 T		7.241		Change	Addition	ქწ
NAME	JOHNSON, R.KELLEY		2.2 N		-				
STREET ADDRESS	18167 US HWY 19 N., STE. 66	ú)			ADDRESS				
CITY+ST-ZIP	CLEARWATER FL	•		CITY-S	1				(
TITLE	DS	DELETE	31 T		<u>'' - ''</u>	<del></del>	Change	Addition	1
NAME	EZELL, NEIL	-	3.2 N		1			_	l
STREET ADDRESS				address					
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TITLE		DELETE	6.1 T	TLE			☐ Change	Addition	1
NAME			62 N	IAME	(				1
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CITY-ST-ZIP			6.40	ITY-SI	- Z(P				
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I 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 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:

R. KELLEY JOHNSON

4/30/97 (813)530-5522