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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Scoretary of State

	1996	€′ DIVISION OF C	OFFORATI	ONS			
DOCUI 1. Corporation	MENT # J54816	6 (0)					
JACK	MESSENGER BARBER COR	PORATION					
					1 110 (110 1110 1111)	E ENIX BYEN ENEW BYE	IN BEBUI BEBUI BUBUI IBBU
Principal Place of Business Mailing Address							
•		· ·					
935 N. BENEVA RD. Suite 615		935 N. BENEVA RD. Suite 615					
SARASOTA	FL 34237	SARASOTA FL 34237				Ta. 5	
				3. Date Incorporated or Qualified 01/29/1987	3a. Date of L 04/21	ast Report I/1995	
2. Principal Pla	ace of Business	2a. Maling Address			4. FEI Number		Applied For
26					59-2074071 Not Applicat		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	3.75 Additional	
City & State		City & State		C Floating Company Figure		Fee Required	
23		28			Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
Zip			Country	Country 8. This corporation has liability for intangib			····
24	25		30		1	□ No	and the second section of
	9. Name and Address of Current	Registered Agent		····	10. Name and Address of New R	egistered Agen	t
1450051	NOTE BIOLINE LOUIS		81	Name			
MESSENGER, RICHARD JOHN			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
2746 BRUCE LANE SARASOTA FL 34237			83				
SAINS	JIA FL 34237		63				
			84	City		FL 85	Zip Code
11. Pursuant to	o the provisions of Sections 607.0502 a	ind 607.1508, Florida Statutes.	the above r	iamed coroo	ration submits this statement for the pur		a its real stared office
or registers	ed agent, or both, in the State of Florida h, and accept the obligations of, Sectio	r Such change was authorized	by the corp	oration's boa	ration submits this statement for the pur rd of directors. Thereby accept the appo	pintment as regis	tered agent. I am
SIGNATURE	, and doods the obligations of, overthe	ir oor lawar, no kaa siakales					
OIGHATORE .	Signature, typed or ported han elof registance, agent a		Boj bosi Ago	tsgratile repre-	Standard remetatingt	0A1L	
12.	F7 50 516		13.		ADDITIONS/CHANGES TO OFFI	·	
TITLE NAME	MEGGENGED DICHARD JOHN		1 11 101			☐ Cha	ange
STREET ADDRESS	0740 BDHOE LANE		1.2 NAM: 1.3 STREFT ADDRESS				
CITY - ST - ZIP	SARASOTA FL 34237						
TITLE	(ASA)		14 CHY S 2 1 THE	1 - 202		Cna	ange
NAME	MESSENGER, ELIZABETH S.		2.2 NAME	İ			ange [] Add-tion
STREET ADDRESS	2746 BRUCE LANE		2.3 STREET	ADDRESS			
CITY - ST - ZIP	SARASOTA FL 34237		2.4 CiTY - S				
TITLE	DELETE 3.1		3 1 TITLE			☐ Cha	inge 🔲 Addition
NAME	MESSENGER, DRENA E.		3.2 NAME				
STREET ADDRESS	2746 BRUCE LANE		33 SIREET	ADDRESS			
CHTY-ST-ZIP	SARASOTA FL 34237		34 CITY S	r - ZiP			
TITLE		DELETE	4 1 JI7LE			Cha	inge 🔲 Addition
NAME STREET ADDRESS			4.2 NAME				
STREET ADDRESS		·	43 STREET				
CITY-ST-ZIP THILE		DELÉTE	44 CHY-S 5 1 TITLE	1 · ZIF		☐ Cha	inge
NAME			5 2 NAME			□ Cia	inge 🗌 Addition
STREET ADDRESS			53 STREET	ADORESS			}
CITY-ST-ZIP			5 4 CITY - S				
TITLE		☐ DELE1E	6 1 TITLE			☐ Cha	nge 🔲 Addition
NAME			6.2 NAME				_
STREET ADDRESS			63 STREET	ADDRESS			
CITY ST - ZIP			6.4 CITY - ST	! - 7IP			

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1.19.07(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 office by director of the corporation or the receiver or trustee empowered to execute this report as required by Orapter 607, Florida Statutes and that my name appears in Block 12 or Block 12 or Block 13 if changed, or on an attachment with an address

GNATURE:

SIGNATURE:

SIGNATURE

SIGNATURE:

CR2E034 (12/95)