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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

7	996	DIVISION OF	CORPORATIO	JNS				
DOCUM		(0)						
	PROPERTIES, INC.							
						A 1811 818 H BIBH 81811 81811 1181		
Principal Place o	of Business	Mailing Address				O OBST OFOR OTHER DIGHT BIRST		
2151 S LANE		2151 S LANE AVE						
67E 303		STE 303						
JACK sonville Fl. 32210 US		JACK OONVILLE FL 32210			3. Date Incorporated or Qualified		3a. Date of Last Report	
		T = 14 5 A11			01/29/1987 4. FEI Number	03/07/19	Applied For	
Principal Place of Business 2a. M 1857 WELLS ROAD 26		⊢	Mailing Address		59-2767342	 -	Not Applicable	
Suite, Apt. #, etc. #205		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	\$8.75 Additional		
<u> </u>	# ZUD	27				- 1-66	Required	
Oity & State Orange Park, Florida		City & State	1 '		Election Campaign Financing Trust Fund Contribution	C] \$5.00 May Be Added to Fees		
Zip Country USA		Zip	1		8. This corporation has liability for intangible tax under s 199.032,			
4 320/3	251	29	30		Florida Statutes Yes 10. Name and Address of New F	No		
	9. Name and Address of Current	Hegisterea Agent	81	Name	10, Name and Address of New P	redistolen wholi		
MULLIS	RONALD L.		1 1		ddress (P.O. Box Number is Not Acceptate	ole)		
2151 S LANE AVE					101 655 \(\) (\) (\) (\) (\) (\) (\) (
STE 303			63	1857 W	Wells Road Suite #205			
JACKSOI	NVILLE FL 32210		84	City	range Park,	FL 85 Z	hp Code 32073	
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statute	es, the above-	named con	poration submits this statement for the nu	rpose of changing its	registered office	
or registere	d agent, or both, in the State of Florida , and accept the obligations of, Section	a. Such change was authorize	ea by the corp	xoration's b	poard of directors. I hereby accept the app	iointment as registerei	d agent. I am	
SIGNATURE.								
12.	Signature, typed or printed name of registered agont a OFFICERS AND		TE: Registered Age	nt signaturé req	rired when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO	ORS IN 12	
TILE	PD	☐ DELETE	1. 1 TITLE			X) Change		
NAME	MULLIS, RONALD L.		12 NAME			_		
STREET ADDRESS	2151 S LANE AVE STE 303			T ADDRESS	1857 WELLS ROAD Suite #205	;		
CITY-ST-ZIP	JACKSONVILLE FL DS			ST-ZIP	Orange Park, Fl. 32073	Change	Addition	
TITLE NAME	TODO, BRENDA M.	- Decerta	2 1 TITLE 22 NAME				_	
STREET ADDRESS	1406 DANCY ST		2 3 STREE	T ADDRESS				
CITY-ST-ZIP	JACKSONVILLE FL		2 4 CITY -			F-2 01	(mar) A d d V	
TITLE		☐ DELETE				Change	Addition	
NAME			3 2 NAME	ET ADDRESS				
STREET ADDRESS			3.a. 31nc	ì				
CITY-ST-ZIP TITLE		☐ DELETE	4. 1 TITLE			☐ Change	Addition	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREE	1 ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5 1 TITLE	!		☐ Change	e Addition	
NAME			5 2 NAME	1				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6 1 TITLE			☐ Change	e 🔲 Addition	
NAME		<u></u>	62 NAME				-	
STREET ADDRESS	Δ			T ADDRESS				
017 / 01 710	///		64 C/TY -	ST-7IP				
14. I do hereby	certify that the information supplied v	vith his filing is voluntarily furn	nished and do	os not qual	ry for the exemption stated in Section 119 curate and that my signature shall have the	9.07(3)(k), Florida State	utes. I further	
oath: that I	the information indicated on this annular am an officer by director of the corpor Block 12 or Block 13 if changes, or o	William of the receiver of truste	SE ELLIDOMEI DO	iue and acc I to execute	curate and that my signature shall have the this report as required by Chapter 607, F	florida Statutes; and t	hat my name	

SIGNATURE: Jude Hoto be per

BRENDA M. TODD RINTED NAME OF SIGNING OFFICER OR DIRECTOR 4-18-96 Date

904-278-2212 Daythie Phone #

CR2E034 (12/95)