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

PROFIT CORPORATION ANNUAL REPORT

1998

WINTER PARK FL 32792

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J68640

> SPITLER, DOUGLAS H. 342 FITZHUGH RD

(8)

JAYHILL ENTERPRISES, INC.

Country

9. Name and Address of Current Registered Agent

Principal Place of Business Mailing Address 342 FITZHUGH RD 342 FITZHUGH RD

WINTER PARK FL 32792

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED Jan 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable

3. Date Incorporated or Qualified

04/21/1987

59-2785292

5. Certificate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

4. FEI Number

82 Street Address (P.O. Box Number is Not Acceptable)

83			
84 City	85	Zip Co	de
FL			
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 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 app	changii ointmen	ng its t as re	registered distered
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			9.0.0.0
SIGNATURE			
Signature, typed or printed name of registered agent and fille it applicable. (NOTE: Registered Agent signature required when reinstating) DATE	0.000	TO DO	01.40
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND THE DELETE 11 TITLE			_
5,7,	L Char	ige	Addition
NAME SPITLER, DOUGLAS H. 1.2 NAME			
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4 L hereby certify that the intermalian symplicid with this filling does not qualify for the examplion stated in Section 119 (7/3Vi). Florida Statutes I further cer			

Country

81 Name

30

The boy compliant the minimization supplied with this filling does not quality for the exemption stated in Section 119.07(3)(1), Horida 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.

Souther FKG-SpitlerED

407-673-0741