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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J81422

(4)

MARJON OF VERO BEACH, INC.

**FILED** Feb 05 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			
736 36TH AVENUE	736 36TH AVENUE			
VERO BEACH FL 32968	VERO BEACH FL 32968		DO NOT WEITT IN THE CRACE	
US	US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	$\neg$
2. Principal Place of Business	2a. Mailing Address		<b>07/02/1987 4.</b> FEI Number Applied For	$\dashv$
21	26		1, pp. ned 1 ci	$\exists$
Suite, Apt. #. etc.	Suite, Apt. #, etc.		SS 75 Additional	判
22	27		5. Certificate of Status Desired Fee Required	
City & State	City & State		6. Election Campaign Financing \$5.00 May Be	7
23	28		Trust Fund Contribution Added to Fees	1
Zîp Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	┪
24 25	29 30	0	Personal Property Tax due June 30. Yes No	
<ol> <li>Name and Address of Current</li> </ol>	Registered Agent		10. Name and Address of New Registered Agent	╛
CUSSON, JOHN J.		81 Name		
3355 12TH PLACE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	-
VERO BEACH FL 32960		OZ Sileet Addi	ess (F.O. Box Number is Not Acceptable)	İ
		83		٦
		04 04		_
		84 City	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named corp	poration submits this statement for the purpose of changing its registered	ī
office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligati	f Florida. Such change was aut lons of, Section 607,0505, Florid	horized by the corporat da Statutes.	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
SIGNATURE				
Signature, typed or printed name of registered agent		legistered Agent signature require	ed when reinstating) DATE	_ £
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_  }
TITLE PTS	DELETE	1.1 TITLE	Change Addition	י [ צֿ
NAME CUSSON, JEFF L.		1.2 NAME		Š
STREET ADDRESS 736 36TH AVENUE	:	1.3 STREET ADDRESS		18
CITY-SI-ZIP VERO BEACH FL		1,4 CITY-ST-ZIP		_\£
TITLE	☐ DELETE	2.1 TITLE	Change Addition	1 19
NAME CUSSON, JOHN J.	ļ	2 2 NAME		
STREET ADDRESS 3355 12TH PLACE	ļ	2.3 STREET ADDRESS		
CITY-ST-ZIP VERO BEACH FL		2. 4 CITY-ST-ZIP	F-12- /- 11-1-11	_
TITLE	DELETE	3.1 TITLE	Charyge  Additto	ባ
NAME KELLY-CUSSON, PATRICIA	ļ	32 NAME	<i>i</i>	
STREET ADDRESS 736 36TH AVE	ļ	3.3 STREET ADDRESS	/	-
CITY-ST-ZIP VERO BEACH FL		3.4. CITY-ST-ZIP		_
TITLE	☐ DELETE	4.1 TITLE	Change	'n
NAME	ļ	4. 2 NAME		ļ
STREET ADDRESS		4.3 STREET ADDRESS	l	ļ
CITY-ST-ZIP		4.4 CITY - ST - ZIP		
TITLE	☐ DELETE	5.1 TITLE	Change Addition	nç
NAME		5.2 NAME	<b>1</b>	1
STREET ADDRESS		5.3 STREET ADDRESS	i de la companya de	1
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE	Change Additi	on
NAME		6.2 NAME	<b>7</b>	Į
STREET ADDRESS		6.3 STREET ADDRESS	1	1
CITY-ST-ZIP		6.4 CITY - ST - ZIP		
14. I hereby certify that the information supplied with indicated on this angular report or supplemental:	this filing does not qualify for t	he exemption stated in the and that my signature	Section 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made undergrowth; that I am an	וח

indicated on this ampliat report or supplemental ampliat report is true and accurate and that my signature shall have the same legal effect as it made under the object of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my shame appears in Block 12 or Block 13 if changed, or on an attachment with an address.

(501) 9 61-1180