Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

-Not:Applicable

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J86383** 1. Corporation Name

J. R. YOUNG, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

us

21

22

23

24

Principal Place of Business 5425 AIRPORT RD: N.

Country

25

NAPLES FL 33942

Mailing Address

5425 AIRPORT RD. N. NAPLES FL 33942 US

2a. Mailing Address

Suite, Apt. #, etc.

City & State

26

27

28

29

Zip

## **FILED** Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90257 020 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Personal Property Tax.

6. Election Campaign Financing

8. This corporation owes the current year Intaggible

08/06/1987 4. FEI Number

-65<del>-</del>0054682--

ALLAN, ROBERT W., CPA 412 SAMAR AVENUE NAPLES R. 33962  11. Persuant to the provisions of Sections 607 0502 and 607 1506. Finished Statutes, the above-named composition submits this statement for the purpose of changing fits registered segment. I am familiar with, and accept the obligations of, Section 607 0505. Finished Statutes, the above-named composition submits this statement for the purpose of changing fits registered segment. I am familiar with, and accept the obligations of, Section 607 0505. Finished Statutes. The compositions board of directors. I hereby accept the appointment as registered segment. I am familiar with, and accept the obligation of, Section 607 0505. Finished Statutes.  SIGNATURE  STORMATURE  STORMATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  1. TIME  POUNG, JAMES R.  1. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. TIME  2. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. STREET ADDRESS  2. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  2. TIME  2. STREET ADDRESS  3. STREET ADDRESS  3. STREET ADDRESS  5. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  3. STREET ADDRESS  5. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  3. STREET ADDRESS  5. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  3. STREET ADDRESS  5. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TIME  3. STREET ADDRESS  5. AD	9. Name and Address of Current Registered Agent ' 10. Name and Address of New Registered Agent							
A12 SAMAR AVENUE NAPLES FL 33982  182 Street Address (F.O. Box Number is Not Addeptable)  183 A City  184 City  185 City  185 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, and the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, and the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, and the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, which is registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, and the corporation's board of directors. I hereby accept the appointment as registered agent, are familiar with, and accept the obligations of, Section 607.0505, Florids Statutes, fundament agent		1	:	8	31 Na	ame		
### 142 SAMAR AVENUE NAPLES FL 33962  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purposa of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  ### SIGNATURE SIGNATURE SIGNATURE    P	•			8	Str	Street Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  SIGNATURE    Signature, typed of printed rature of registered agent and accept the obligations of, Section 607.0505, Florids Statutes.   12.	• • • • • • • • • • • • • • • • • • •			"				
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 changing its registered 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 appointment as registered office or registered agent, i am familiar with, and accept the obligations of, Section 607.1505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   YOUNG, JAMES R.   12. NAME  YOUNG, JAMES R.   12. NAME  TITLE   OFFICERS AND DIRECTORS   14. CITY-ST-2P  TITLE   OFFICERS AND D	NAPLES FL 33962				13			
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 changing its registered 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 appointment as registered office or registered agent, i am familiar with, and accept the obligations of, Section 607.1505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE   YOUNG, JAMES R.   12. NAME  YOUNG, JAMES R.   12. NAME  TITLE   OFFICERS AND DIRECTORS   14. CITY-ST-2P  TITLE   OFFICERS AND D			1	\-	14 64	gs Zin Code		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the applications of section 607.0505. Floridad Statutes.  SIGNATURE    12			I	°	94 01	FL   15   24 0000		
Suparative, typed of prinded raised in degree agent and tibe it applicables   (NOTE Registered Agent algoritare required when naminating)   Living   Livin	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 appointment as registered							
12. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE	SIGNATURE    Storogram, broad of printed parts of registered agent and title if applicable //NOTE: Registered Agent signature required when reinstating)   DATE							
TITLE	12.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRES			ELETE	1.1 TITLE	Ē	Change ☐ Addition		
STREET ADDRESS CITY. ST. ZIP NAPLES FL    1.6 CITY. ST. ZIP   Change   Addition		, <b>,</b>	j	1.2 NAMI	E	,		
CITY-ST-ZIP				1.3 STREET ADDRES		RESS .		
DELETE   21 TITLE				1.4 CITY-ST-ZiP				
23 STREET ADDRESS   23 STREET ADDRESS   24 CTTY_ST_ZIP   25 CTTY_ST_ZIP	$\overline{}$		ELETE					
23 STREET ADDRESS   24 CITY-ST-ZIP   24 CITY-ST-ZIP   Addition	NAME	-	i	2.2 NAM	E			
2 4 CITY-ST-ZIP			1	2.3 STRE		RESS :		
TITLE	ì	•	j '	2.4 CITY	Y-ST-ZIP	,		
NAME				3.1 TITLE	E	☐ Change ☐ Addition		
3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   3.4 CITY-ST-ZIP			· I	3.2 NAM	Œ			
34. CITY-ST-ZIP			i	3.3 STRE	EET ADDR	RESS		
TITLE			5	3.4. CITY	Y-ST-ZIP			
STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE S STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS CITY-ST-ZIP TITLE S STREET ADDRESS STREET ADDRE			ELETE	4.1 TITLE	 E	Change Addition		
STREET ADDRESS  CITY-ST-ZIP  144 CITY-ST-ZIP  151 TITLE  NAME  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  154 CITY-ST-ZIP  154 CITY-ST-ZIP  154 CITY-ST-ZIP  154 CITY-ST-ZIP  154 CITY-ST-ZIP  155 CITY-ST-ZIP  156 CITY-ST-ZIP  157 CAnge	NAME		1	4. 2 NAM	Æ			
A4 CITY-ST-ZIP			i	4.3 STRE	EET ADDA	RESS		
DELETE   S.1 TITLE   Change   Addition     NAME   S.2 NAME     S.3 STREET ADDRESS     S.4 CITY-ST-ZIP     TITLE   DELETE   Change   Addition     S.4 CITY-ST-ZIP     DELETE   Change   Addition     S.5 CITY-ST-ZIP     Change   Addition     Addition     STREET ADDRESS     S.3 STREET ADDRESS     S.4 CITY-ST-ZIP     Change   Addition     Addition     STREET ADDRESS     S.5 STREET ADDRESS     S.6 CITY-ST-ZIP     CITY-ST-ZIP     CITY-ST-ZIP     CITY-ST-ZIP     Change   Addition     Addition     Addition     Change   Addition     Addition     Addition     Change   Addition     Addition     Change   Addition     Cha	i			4.4 CITY	-ST-ZIP			
NAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY-ST-ZIP         54 CITY-ST-ZIP           TITLE         DELETÉ         6.1 TITLE         Change         Addition           NAME         1         62 NAME           STREET ADDRESS         6.3 STREET ADDRESS         6.4 CITY-ST-ZIP           CITY-ST-ZIP         6.4 CITY-ST-ZIP         Florida Statutes I further certify that the information			ELETE					
STREET ADDRESS  CITY-ST-ZIP    S4 CITY-ST-ZIP   S4 CITY-ST-ZIP     TITLE   DELETÉ   6.1 TITLE   Change   Addition     Addition   STREET ADDRESS   S4 CITY-ST-ZIP     Change   Addition     Change   Ad			1	5.2 NAM	Œ			
CITY-ST-ZIP    S.4 CITY-ST-ZIP     S.4 CITY-ST-ZIP     Change   Addition		·	;	5.3 STR	EET ADOI	RESS		
TITLE    DELETE   6.1 TITLE   Change   Addition			i	5.4 CITY	'-ST-ZIP			
NAME  STREET ADDRESS  CITY-ST-ZIP  6.2 NAME  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.5 STREET ADDRESS  6.5 STREET ADDRESS  6.5 STREET ADDRESS  6.6 STREET ADDRESS  6.7 STREET ADDRESS  6.7 STREET ADDRESS  6.8 STREET ADDRESS  6.9 STR			ELETE	6.1 TITLE		Change Addition		
STREET ADDRESS  CITY-ST-ZIP  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  7.5 Table to the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information			i	6.2 NAM	lĖ			
CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  7.4 Library Control of the type of the symptom stated in Section 119 07/3)(i) Florida Statutes, I further certify that the information		-	1	6.3 STRI	EET AOD	RESS		
14. I because cartify that the information symplicity with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information				6.4 CITY	-ST-ZIP			
	44 1 handers	certify that the information supplied with this filing does not	qualify for th	e evem	ntion s	stated in Section 119 07(3)(i) Florida Statutes, I further certify that the information		

Country

30

officer or director of the corporation or the receiver or trustee empowered to execute this report as re-Block 12 or Block 13 if changed, or on an attachment with an address; with all other like empowered:

SIGNATURE: