

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**CORPORATION
ANNUAL REPORT
1994**



FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

94 AUG 23 PM 12:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J91015 (4)

1. Corporation Name
JODAWON CORPORATION

Mailing Address: ~~1. CARL E. RIECK, JR.~~
~~476 MEADOW LARK DR.~~
SARASOTA FL 34236
 Principal Place of Business: ~~1. CARL E. RIECK, JR.~~
~~476 MEADOW LARK DR.~~
SARASOTA FL 34236

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address: **200A Sarasota Quay**
 Suite, Apt. #, etc.:
 City & State:
 Zip: Country:
 2a. Principal Place of Business: **200A Sarasota Quay**
 Suite, Apt. #, etc.:
 City & State:
 Zip: Country:

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified: **09/04/1987**
 3a. Date of Last Report: **07/23/1993**
 4. FEI Number: **59-2840841**
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: ☐
 7. Nonprofit with IRS 501(c)(3): ☐
 8. ☒ Yes ☐ No
 Florida Statutes for intangible tax under § 199.032.

9. Name and Address of Current Registered Agent

~~RIECK, CARL E., JR.~~
476 MEADOW LARK DR.
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81. Name: **RIECK, JOAN D.**
 82. Street Address (P.O. Box Number is Not Acceptable):
 83.
 84. City: **FL** 85. Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 agent. I am familiar with, and accept the obligations of, Section 607.0503 or 617.0503, Florida Statutes.

SIGNATURE: *Joan D. Rieck* **JOAN D. RIECK**

12. OFFICERS AND DIRECTORS

1.1 TITLE: **D**
 1.2 NAME: **RIECK, CARL E., JR.**
 1.3 STREET ADDRESS: **476 MEADOW LARK DR.**
 1.4 CITY, ST, ZIP: **SARASOTA FL**
 2.1 TITLE: **D**
 2.2 NAME: **RIECK, JOAN D.**
 2.3 STREET ADDRESS: **476 MEADOW LARK DR.**
 2.4 CITY, ST, ZIP: **SARASOTA FL**
 3.1 TITLE:
 3.2 NAME:
 3.3 STREET ADDRESS:
 3.4 CITY, ST, ZIP:
 4.1 TITLE:
 4.2 NAME:
 4.3 STREET ADDRESS:
 4.4 CITY, ST, ZIP:
 5.1 TITLE:
 5.2 NAME:
 5.3 STREET ADDRESS:
 5.4 CITY, ST, ZIP:
 6.1 TITLE:
 6.2 NAME:
 6.3 STREET ADDRESS:
 6.4 CITY, ST, ZIP:

13. CHANGES TO OFFICERS, AGENTS OR DIRECTORS IN 1993

1.1 TITLE:
 1.2 NAME:
 1.3 STREET ADDRESS:
 1.4 CITY, ST, ZIP:
 2.1 TITLE:
 2.2 NAME:
 2.3 STREET ADDRESS:
 2.4 CITY, ST, ZIP:
 3.1 TITLE:
 3.2 NAME:
 3.3 STREET ADDRESS:
 3.4 CITY, ST, ZIP:
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 4.2 NAME:
 4.3 STREET ADDRESS:
 4.4 CITY, ST, ZIP:
 5.1 TITLE:
 5.2 NAME:
 5.3 STREET ADDRESS:
 5.4 CITY, ST, ZIP:
 6.1 TITLE:
 6.2 NAME:
 6.3 STREET ADDRESS:
 6.4 CITY, ST, ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 11.001, 11.002, 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 officer or director of the corporation or the receiver, or, if not so empowered, to receive this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed or on an attachment with an address.

SIGNATURE: *Joan D. Rieck* **JOAN D. RIECK** (813) 84-7400
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIFY OFFICER OR DIRECTOR