SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** J91015 JODAWON CORPORATION Mailing Address Principal Place of Business 4908 LINSEY COURT 200A SARASOTA OUAY SARASOTA FL 34243 SARASOTA FL 34236 3a. Date of Last Report 211 3. Date Incorporated or Qualified HS 09/04/1987 05/01/1995 Applied For FF1 Number 2a. Mailing Address 2. Principal Place of Business 59-2840841 Not Applicable NONE 26 21 \$8.75 Additional Suite Apt #, etc 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199 032 Country Zip Zip Country Yes No Florida Statutes 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RIECK, JOAN D Street Address (P.O. Box Number is Not Acceptable) 82 4908 LINSEY CT. SARASOTA FL 34243 - 4555 **B3** Zip Code 85 City 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. Thereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. DATE **SIGNATURE** (NOTE: Registered Agent's ignature require t when remotating) Signature typed or provid name of respirated as and and the diapph rable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/E)13. OFFICERS AND DIRECTORS 12 Change Addition DELETE 1.1 100.6 D TITLE CR2E034 12 NAME RIECK, CARL E. JR NAME 13 STREET ADDRESS 4908 LINSEY CT. STREET ADDRESS 1.4 CITY - ST - ZIP SARASOTSA FL CITY ST-ZIP Change Addition 21 TITLE THILE 2.2 NAME RIECK, JOAN D. NAME 2.3 STREET ADDRESS 4908 LINSEY CT. STREET ADDRESS SARASOTA FL CITY-SI-ZIP Change Addition THILE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4. CITY - \$1 - ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CHY+ST-ZIP CITY-ST-ZIP Change Addition DELETE 5 1 THUE TITLE NAME 5.3 STREET ADDRESS STREET ADDRESS 54 City - ST - ZIP CITY - ST - ZIP Change Addition DELETE 6 1 TISLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 CiTY - \$1 - ZiP I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, 1 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address CITY-ST-ZIP

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN

JOAN D

D. RIECK

6-26-96

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