

FILE NOW: FILING FEE AFTER MAY 11 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K16933 (9)

1. Corporation Name

RIVER CITY JEWELRY & PAWN, INC.

Principal Place of Business

300-37 DUNN AVE.
STE. 37
JACKSONVILLE FL 32218
US

Mailing Address

300-37 DUNN AVE.
STE. 37
JACKSONVILLE FL 32218
US

FILED
95 JAN 27 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/26/1988	3a. Date of Last Report 04/27/1994
4. FEI Number 59-2892919	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 3000 Dunn Ave	26 3000 Dunn Ave
22 Suite, Apt. #, etc. #37	27 Suite, Apt. #, etc. #37
23 City & State Jacksonville FL	28 City & State Jacksonville FL
24 Zip 32218	29 Zip 32218
25 Country USA	30 Country USA

9. Name and Address of Current Registered Agent

BONNETT, JEROME S.
10551 BIG TREE CIRCLE EAST 1795-A 1ST ST. SOUTH
JACKSONVILLE FL 32257 Jax Bch, FL 32250

10. Name and Address of New Registered Agent

81 Name Bonnett Jerome S
82 Street Address (A.O. Box Number is Not Acceptable) 1795-A 1ST ST. South
83 City Jacksonville Beach
84 City FL
85 Zip Code 32250

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jerome Bonnett **Jerome Bonnett Pres 1-24-95**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	President ☒ Change ☐ Addition
NAME	BONNETT, JEROME S.	1.2 NAME	Bonnett, Jerome S.
STREET ADDRESS	10551 BIG TREE CRT 1795-A 1ST ST. S.	1.3 STREET ADDRESS	1795-A 1ST ST. S.
CITY-ST-ZIP	JACKSONVILLE FL Jax Bch FL 32250	1.4 CITY-ST-ZIP	Jax Bch FL 32250
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 Section 110.07(3)(b), 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 trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jerome Bonnett **Jerome Bonnett 1/24/95 9047654695**
President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Daytime Phone