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

PROFIT CORPORATION ANNUAL REPORT 1297

Principal Place of Business

1200 N FEDERAL HWY

STE 111



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K47376

(4)

Mailing Address

STE 111

1200 N FEDERAL HWY

BOCA RATON FL 33432-2844

RJS/JACKSON MANAGEMENT GROUP, INC.

BOCA RATON FL 33432 US		BOCA RATON FL 33432-2844 US		3. Date Incorporated or Qualified 11/21/1988	3e. Date of Last Report 04/03/1996	
2. Principal Pl	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			65-0085309	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζιρ 24	Country 25	Zip 29	30	untry	1,0,,000 protection	Yes No
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent
CLIN	ITON, DONALD J.			81 Name		
1200 N FEDERAL HWY				82 Street Addr	ess (P.O. Box Number is Not Acceptab	ole)
STE 111						
BOCA RATON FL 33432				83		
				64 City		FL 85 Zip Code
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was	: authoriz	ed by the corporat	poration submits this statement for the ption's board of directors. I hereby acception's	ourpose of changing its registered of the appointment as registered
SIGNATURE						
Stignature, typed or proded name of registered agent and title if applicable		··		ed Agent signature requi		DATE
12.	OFFICERS AI	ND DIRECTORS	13	TITLE T	ADDITIONS/CHANGES TO OFFIC	Change Addition
THILE	CLINTON, DONALD J.	☐ ptreit	•	· .		Ci Change Ci Monitori
NAME	1200 N FEDERAL HWY, STE	111		NAME		
STREET ADDRESS	BOCA RATON FL	111		STREET ADDRESS		•
CITY - ST - ZIP	STD	DELEYE		CITY-ST-ZIP TITLE		Change Addition
TITLE	JACKSON, JOSEPH	Land DECENT	_	NAME		
NAME STREET ADORESS	1200 N FEDERAL HWY, STE	111	1	STREET ADDRESS	•	
	BOCA RATON FL	•••		CITY-ST-ZIP		
CITY - ST - ZIP	DOUR WHOM I E	DELETE		TITLE		Change Addition
				HILE I		C Oldings C Price of the

14. I do hereby certify that 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.

6.4 CITY-ST-ZIP

3.3 STREET ADDRESS

43 STREET ADDRESS

44 CITY-ST-ZIP

5.4 CITY-ST-ZIP

3.4. CITY - ST - Z(P

41 TITLE

4. 2 NAME

51 TITLE

52 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

STREET ACIDRESS

CITY-ST-ZIP

CITY-ST-2IF

CITY - SY - ZIP

TITLE

NAME

TITLE NAME

1-TLE NAME

NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

FILED

Mar 05 1997 8:00am

Secretary of State

581-395-1200

Change

Change

Change

___ Addition

Addition

Addition