**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K53657** **(8)**

1. Corporation Name
**J.R.'S VIDEOS, INC.**

Principal Place of Business
**% RAYMOND, JOHN MELTON**
**445 STATE RD 13, S. SUITE # 21**
**FRUIT COVE FL 32259**

Mailing Address
**% RAYMOND, JOHN MELTON**
**445 STATE RD 13, S. SUITE # 21**
**FRUIT COVE FL 32259**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **12/19/1988**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business
21 445 State Road 13
Suite, Apt. #, etc.
22 #21
City & State
23 Jacksonville FL
Zip
24 32259
Country
25 USA

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: **59-2915293** ☐ 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

9. Name and Address of Current Registered Agent

**RAYMOND, JOHN M.**
**3629 PEACH DRIVE**
**JACKSONVILLE FL 32216**

10. Name and Address of New Registered Agent

81 Name
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, 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | DP | 11 TITLE | ☐ Change ☐ Addition |
| NAME | RAYMOND, JOHN M. | 12 NAME | |
| STREET ADDRESS | 3629 PEACH DRIVE | 13 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL | 14 CITY-ST-ZIP | |
| TITLE | VD | 21 TITLE | ☐ Change ☐ Addition |
| NAME | BLACK, DONALD R. | 22 NAME | |
| STREET ADDRESS | 5188 SIESTA DEL RIO DR. | 23 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL | 24 CITY-ST-ZIP | |
| TITLE | TD | 31 TITLE | ☐ Change ☐ Addition |
| NAME | BLACK, MARY C. | 32 NAME | |
| STREET ADDRESS | 5188 SIESTA DEL RIO DR. | 33 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL | 34 CITY-ST-ZIP | |
| TITLE | SD | 41 TITLE | ☐ Change ☐ Addition |
| NAME | BOMAR, CHERYL | 42 NAME | |
| STREET ADDRESS | 1472 MARLEE ROAD | 43 STREET ADDRESS | |
| CITY-ST-ZIP | JACKSONVILLE FL 32259 | 44 CITY-ST-ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 64 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 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 changed, or on an attachment with an address.

**SIGNATURE:** Mary Black Treasurer 3/30/95 904 287-1628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0028047 CP