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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # K5

7528 (7)

FILED Feb 23 1998 8:00am Secretary of State

	OF JACKSONVILLE, INC.				
Principal Plac	ce of Business	Mailing Address			t Diget Gruff bilbit bildit bibii 1981
13722 BROMLEY POINT DR 13722 BROMLEY POINT SUITE 100 SUITE 100					
JACKSONVILLE FL 32225 JACKSONVILLE FL US US			25	DO NOT WRITE IN TI	HIS SPACE
03		03		3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		01/11/1989 4. FEI Number	Applied For
21		26		59-2923383	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Register	red Agent
	ACOBS, KENNETH B		81 Name		
1301 RIVERPLACE BLVD. SUITE 1629			82 Street A	ddress (P.O. Box Number is Not Acceptable)	······································
			63		
JA	ACKSONVILLE FL 32207		63		
			84 City		85 Zip Code
			4		-L os zipode
office or i	to the provisions or Sections 607.05 registered agent, or both, in the Stat	uz and 607.1508, Florida Statt e of Florida. Such change was	nes, the above-hamed to authorized by the corp	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	se or changing its registered appointment as registered
agent. I s	am fa miliar with, and accept the obliq	gations of, Section 607.0505, F	lorida Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	and and all III and table (810)	TE: Registered Agent signature r	equired when reinstating) DA	·
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	WOMBOUGH, JOHN E., JR.	- -	1.2 NAME		
STREET ADDRESS 13722 BROMLEY POINT DRI			1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		ĺ
TITLE	SD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	WOMBOUGH, MARY R.		2.2 NAME		
STREET ADDRESS	13722 BROMLEY POINT DR	IVE .	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Decer	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP		Change Addition
		LJ VELEIE	6.1 TITLE		Therefore The American
NAME PERCET APPROPRIES			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	l		6.4 CITY - ST- 7IP	Lin Section 119 07(3)(i) Florida Statutes I furthe	

4. I 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 eath; 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.

MATURE. John & Stanlows &

JOHNA WUNGOVEH, JA

2/11/20 (900)2000208