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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K93457

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JGCC PROPERTIES, INC.

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| Apr 03 1997 8:00am |
| Secretary of State |



| Principal Place of Business PO BOX 6746 JACKSONVILLE FL 32236-6746 US | | PO BOX 6 | Mailing Address PO BOX 6746 JACKSONMILLE FL 32236-6746 US | | | 3. Date Incorporated or Qualifie | | Date of Le | , . | | |
|--|--|--|--|--------------------------------|--|--|---------------------------|--|-------------------|----------------------|---|
| 2. Principal F | lace of Busine | SS | 2a. Mailing | Address | | | | 4. FEI Number | | 7/20/10 | Applied For |
| 21 | | | 26 | y | | | | 59-2955474 | | | Not Applicat |
| ≛!1 Suite, Apt | #, etc | | | Apt. #, etc. | | | | | | \$8.7 | 5 Additional |
| 22 | | | 27 | · | | | | 5. Certificate of Status Desired | | | Required |
| City & Stat | e | | City & 28 | State | | | 1,11 | Election Campaign Financing Trust Fund Contribution | | | 00 May Be |
| Zip | 1 | Country | Zip | | Count | try | | 8. This corporation has fiability f | or intangible | | |
| 24 | 2 | 5 | 29 | | 30 | | | Florida Statutes | X Yes | | |
| | 9. Name (| and Address of Cu | irrent Registered A | gent | | | | 10. Name and Address of New | Registered | l Agent | |
| FRA | VNKLIN, JR., | BEN T. | | | 8 | 31 N | ame | | | | |
| | SOUTH ED | gewood aveni Fi. 32205 | UE | | 82 Street Add | | reet Addr | ess (P.O. Box Number is Not Accep | table) | | |
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The managed canny that the information supplied with this mining does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Turther 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 13 if changed, or on an attachment with a address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR