

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L10643 (9)

1. Corporation Name

JONES, WILSON, VALLEJO ASSOCIATES, P.A.



Principal Place of Business

4335 HIGHLAND PARK BLVD.
LAKELAND FL 33813

Mailing Address

4335 HIGHLAND PARK BLVD.
LAKELAND FL 33813

3. Date Incorporated or Qualified
08/18/1989

3a. Date of Last Report
04/10/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number
59-2963238

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

10. Name and Address of New Registered Agent

VALLEJO, SERGIO R.
875 HANOVER WAY
LAKELAND FL 33813

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, Chapter 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/25/96

12. OFFICERS AND DIRECTORS

TITLE	D	DELETED
NAME	VALLEJO, SERGIO R.	
STREET ADDRESS	875 HANOVER WAY	
CITY - ST - ZIP	LAKELAND FL	
TITLE	D	DELETED
NAME	JONES, RANDY P	
STREET ADDRESS	5819 HOLLYHOCK DRIVE	
CITY - ST - ZIP	LAKELAND FL	
TITLE	D	DELETED
NAME	WILSON, THOMAS A	
STREET ADDRESS	5101 LAKE IN THE WOODS BLVD.	
CITY - ST - ZIP	LAKELAND FL	
TITLE	D	DELETED
NAME	JONES, RANDY P	
STREET ADDRESS	5819 HOLLYHOCK DRIVE	
CITY - ST - ZIP	LAKELAND FL	
TITLE	D	DELETED
NAME	WILSON, THOMAS A	
STREET ADDRESS	5101 LAKE IN THE WOODS BLVD	
CITY - ST - ZIP	LAKELAND FL	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	Change	Addition
12 NAME		
13 STREET ADDRESS		
14 CITY - ST - ZIP		
2 1 TITLE	Change	Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		
3 1 TITLE	Change	Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
4 1 TITLE	Change	Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
5 1 TITLE	Change	Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
6 1 TITLE	Change	Addition
62 NAME		
63 STREET ADDRESS		
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)(k), 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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/96 (941) 648 0046

CR2E034 (12/95)