

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

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AND  
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95 MAR -7 PM 3:25

CORPORATION  
ANNUAL REPORT  
1995



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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L13992** (7)

1. Corporation Name  
**J & J ENTERPRISES OF CITRUS COUNTY, INC.**

Principal Place of Business      Mailing Address  
**6601 GULF TO LAKE HWY  
CRYSTAL RIVER FL 34429  
US**                                      **6601 GULF TO LAKE HWY  
CRYSTAL RIVER FL 34429  
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**09/07/1989**                                      **02/28/1994**

4. FEI Number      Applied For  
**59-3001283**                                       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

2. Principal Place of Business      2a. Mailing Address  
21    26  
Suite, Apt. #, etc.                                      Suite, Apt. #, etc.  
22    27  
City & State    City & State  
23    28  
Zip                                      Country                                      Zip                                      Country  
24                                      25                                      29                                      30

9. Name and Address of Current Registered Agent  
**BERTOCH, CARL A ESQ  
537 E PARK AVE  
TALLAHASSEE FL 32301**

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 (hand or printed name of registered agent and fee if applicable)      NOTE: Registered Agent signature required when re-registering

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>
NAME	<b>RAPPISSE, JOHN C.</b>
STREET ADDRESS	<b>7035 W. TERESA LANE</b>
CITY - ST - ZIP	<b>CRYSTAL RIVER FL</b>
TITLE	<b>D</b>
NAME	<b>RAPPISSE, MARIETTA</b>
STREET ADDRESS	<b>7035 W. TERESA LANE</b>
CITY - ST - ZIP	<b>CRYSTAL RIVER FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	<b>34429</b>
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	<b>34429</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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: *x Marietta Rappisse*  
SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

*2-28*  
DATE