4 29-97 B-5815 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L89127

(9)

Mailing Address

J. R. CROCKETT, INC.

Principal Place of Business

FILED					
Apr 29 1997 8:00am					
Secretary of State					

8700 E. OAKLAND PK BLVD.			2700 E. OAKLAND PK. BLVD.				
FT, LAUDERDALE FL 33306		FT. LAUDERDALE FL 933	06-1623				
US .			us		3. Date Incorporated or Qualified 3a. Date of Last Fleport 07/23/1990 04/16/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For		
		kland Pk B		above)	65-0212135 Not Applicable		
Suite Apt.			Suite, Apt. #, etc.		5. Certificate of Status Desired 🔀 \$8.75 Additional		
22 Suite C City & State			27		Fee Required		
23 Ft. Lauderdale, F1.			City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	_	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,		
24 3330		25 Broward	[29]	30 Broward	d Florida Statutes Yes No		
to, realite and Address of Current registered Agent							
	CROCKETT, JOHN R.						
B2 Street Address (P.O. Box Number is Not Acceptable)							
2727 E OAKLAND PK BLVD. #204-B 2157 Coral Gardens Drive WILTON MANORS FL 33306 83							
WIL	IOH MINITO	INO FL 33300					
				84 City	85 Zip Code		
11. Pursuant	to the provis	ions of Sections 607 05	AZ un t-007-1508 Florida Statut	os the above named	Wilton Manors, FL 33306		
11. Pursuant to the provisions of Sections 607.0507 and 607.1566, 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	Ignative, typed	or printed name of registered ag	pent and little if applicable (NO)	OCKETT E Registered Agent a gnature	ure required whon reinstating) DATE		
12.		· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	_	☐ DELETE	1.1 TITLE	D Strange Addition		
NAME		TT, JOHN R.		1.2 NAME	CROCKETT, JOHN E.		
STREET ADDRESS		RAL GARDENS DR		1.3 STREET ADDRESS			
CITY-ST-ZIP		MANORS FL		1.4 CITY+ST-ZIP	Wilton Manors, Fl 33306		
TITLE	DST		☐ DELETE	2.1 TITLE	D Change Addition		
NAME		TT, HELENE		2.2 NAME	CROCKETT, HELENE		
STREET ADDRESS		RAL GARDENS DR.		2.3 STREET ADDRESS	2157 Coral Gardens Dr		
CITY-ST-ZIP	WILTON	MANORS FL	D severe	2.4 CITY - ST - ZIP	Wilton Manora F1 32205		
TITLE			[_] DELETE	3.1 TITLE	Change Addition		
NAME				3.2 NAME	CROCKETT, SAMUEL K.		
STREET ADDRESS				33 STREET ADDRESS	Titico M.D. Titu Mah		
CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	☐ DELETE	3 4. C)1Y - ST - ZIP 4 1 TITLE	Ft. Vandardala El 22204		
NAME					Change Addition		
STREET ADDRESS				4. 2 NAME			
CITY-ST-ZIP				4.3 \$1REF1 ADDRESS			
TITLE			DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Addition		
NAME			The second	5.2 NAME	Continue Continue		
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY - \$1 - 2IP			
TITLE			DELETE	6.1 TITLE	Change Addition		
NAME			_	6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS	;		
CITY-ST-ZIP				6.4 CITY - ST - ZIP			

14. I do 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 oath; that I am an officer or director of the corporation or the receiver or trusten 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.

1. R. CROCKETT 04/23/97