

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M78493

1. Corporation Name
THE JERGER COMPANY, INC.

Principal Place of Business
7785 66 ST N
PO BOX 8080
PINELLAS PARK FL 33780-8080
US

Mailing Address
7785 66 ST N
PO BOX 8080
PINELLAS PARK FL 33780-8080
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1988

4. FEI Number

59-2884483

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

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

33781-3113

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, on 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

RAYMOND BLACKLIDGE

APRIL 14, 1999

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME NYE, DAVID
STREET ADDRESS 5717 CRESTVIEW DR
CITY-ST-ZIP LADY LAKE FL 32159

TITLE ☐ DELETE

NAME JEFFREY, SHERYL
STREET ADDRESS 5770 109TH AVENUE NORTH
CITY-ST-ZIP PINELLAS PK FL 33782

TITLE ☐ DELETE

NAME BEATY, STEVE
STREET ADDRESS 1050 PRESTWICK PLACE
CITY-ST-ZIP DUNEDIN FL 34698

TITLE ☐ DELETE

NAME SADLER, CHARLES B.
STREET ADDRESS 11722 WALKER AVE
CITY-ST-ZIP SEMINOLE FL 33772

TITLE ☐ DELETE

NAME MEYER, BRUCE T
STREET ADDRESS 506 BROOKTREE CT
CITY-ST-ZIP LUTZ FL 33548

TITLE ☐ DELETE

NAME DVS
STREET ADDRESS BLACKLIDGE, RAYMOND M
CITY-ST-ZIP 28810 FALLING LEAVES WAY
WESLEY CHAPEL FL 33543-5761

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: RAYMOND BLACKLIDGE

APRIL 14, 1999

(727) 546-8911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0428151

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90196 023 ***150.00

