## FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Mar 19 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # M82474 (1)J & B MASON, INC. Principal Place of Business Mailing Address 20. Box 6184 1977 NORTHGATE BLVD. VENICE SARASOTA PL 34234 DO NOT WRITE IN THIS SPACE SARASOTA FL 34234 3. Date Incorporated or Qualified 05/20/1988 PO Boy 6184 Applied For 2. Principal Place of Business 4. FEI Number 2100 CONSTITUTION BK 65-0058843 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State Sarassta \$5.00 May Be 6. Election Campaign Financing FL. JEN (c Trust Fund Contribution Added to Fees Country US. Country This corporation owes or has paid the current year Intangible 29 **3 42.42-678** 6 Yes Yes □ No Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name BOONE, JEFFREY A. 1001 AVENIDA DEL CIRCO 82 Street Address (P.O. Box Number is Not Acceptable) **VENICE FL 34285** 83 84 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1 1 TITLE TITLE MASON, WILLIAM E. 1 2 NAME NAME 1001 AVENIDA DEL CIRCO STREET ADDRESS 1.3 STREET ADDRESS VENICE FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE SD 21 TITLE MASON, JEAN G. NAME 22 NAME 1001 AVENIDA DEL CIRCO 2.3 STREET ADDRESS STREET ADDRESS **VENICE FL** 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 3 1 TITLE HAWKINS, ALAN 3.2 NAME NAME 1001 AVENIDA DEL CIRCO 3.3 STREET ADDRESS STREET ADORESS **VENICE FL** CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-S1-ZIP TITLE DELETE 6.1 TITLE Change \_\_\_ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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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 address.

Villiam & Maron

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SIGNATURE: