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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M86646

(0)

J & D STORAGE, INC.

SIGNATURE:

FILED Apr 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					T ABDYROOM FOL IDNING BRING BR
NJANET COX 884 MONTROSE STREET CLERMONT FL 34711-2120		%JANET COX 684 MONTROSE STREET CLERMONT FL 34711-2120			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 06/23/1988
2. Principal P	2a. Mailing Address			4. FEI Number Applied For	
21		26			59-2446595 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27		 	Fee Required
City & Stat	6	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	7 _{IP}	Country	,	
24	25		30	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No
	9. Name and Address of Current		T		10. Name and Address of New Registered Agent
CO	X. JANET		81	Name	ıe
	MONTROSE STREET		62	Street	et Address (P.O. Box Number is Not Acceptable)
	ERMONT FL 34177		L_	J.,	X readings (Tex Box (Gride)
•			83		
			84	City	■■ 85 Zip Code
-					
11. Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State :	i and 607.1508, Florida Statuti of Florida. Such change was a	es, the abov authorized b	e-named y the cor	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
agent ta	m familiar with, and accept the obliga	ions of, Section 607.0505, Fic	orida Statute	S.	
SIGNATURE	Signature, typed or printed name of registered ager	and title it applicable (NOTE	F: Registered An	ent skaneture	ure required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	ROCKER, JOHN		1.2 NAME		John L. Kocker Jr.
STREET ADDRESS	320 E. LAKESHORE DRIVE		1 3 STREET	ADDRESS	John L. Rocker, Jr. Change Addition Addition
City-St-Zip	CLERMONT FL		1.4 CITY-5	ST-ZIP	
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	ROCKER, MARY		2.2 NAME		Thary I. Rockes
STREET ADDRESS	320 E. LAKESHORE DRIVE		2.3 STACE1		5
CITY-ST-ZIP TITLE	CLERMONT FL D	DELETE	2. 4 CITY - 3.1 TITLE	SI-ZIP	☐ Change ☐ Addition
NAME	CORNELL, DANE R.	C veen	3.2 NAME		Contrago — Contrago
STREET ADDRESS	1922 BRANTLEY CIRCLE		3.3 STREET	ADDRESS	
CITY-ST-ZIP	CLERMONT FL		3.4. CITY-		^
TITLE	D	DELETE	4.1 TITLE	<u> </u>	Change Addition
NAME	CORNELL, JUDY		4, 2 NAME		
STREET ADDRESS	1922 BRANTLEY CIRCLE		4.3 STREET	ADDRESS	s
CITY-ST-ZIP	CLERMONT FL		4.4 CITY - S	ST - ZIP	<u></u>
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	5.2 N		5.2 NAME		
STREET ADDRESS	REET ADDRESS 5.3		5.3 STREET	ADDRESS	S
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET		
			al 6 T CTRFFT	2248004	S 1

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.