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Mar 27 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N05977 (6)

1. Corporation Name

NEW JERSEYANS OF FLORIDA, INC.

Principal Place of Business

449 LAKE OF THE WOODS DR  
VENICE FL 34293

Mailing Address

449 LAKE OF THE WOODS DR  
VENICE FL 34293-4174



3. Date Incorporated or Qualified  
11/02/1984

3a. Date of Last Report  
04/22/1996

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

10. Name and Address of New Registered Agent

KING, KARL A  
449 LAKE OF THE WOODS DR  
VENICE FL 34293

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE  
NAME KING, KARL A.  
STREET ADDRESS 449 LAKE OF THE WOODS DR  
CITY-ST-ZIP VENICE FL

1.1 TITLE President ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS Andersen, Leslie 34224  
1.4 CITY-ST-ZIP 6998 Gunther Street, Englewood, FL

TITLE D ☒ DELETE  
NAME SCIORTINO, PHILIP  
STREET ADDRESS ROYAL ROAD  
CITY-ST-ZIP VENICE FL 34293

2.1 TITLE Trustee ☒ Change ☐ Addition  
2.2 NAME Guarro, James  
2.3 STREET ADDRESS 913 Beckley Drive  
2.4 CITY-ST-ZIP Venice, FL 34292

TITLE T ☐ DELETE  
NAME THACKARA, LORRAINE  
STREET ADDRESS 333 REDWOOD ROAD  
CITY-ST-ZIP VENICE FL

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE S ☒ DELETE  
NAME KING, AUDREY L  
STREET ADDRESS 449 LAKE OF THE WOODS DRIVE  
CITY-ST-ZIP VENICE FL 34293

4.1 TITLE Secretary ☒ Change ☐ Addition  
4.2 NAME Reilly, Ruth  
4.3 STREET ADDRESS 6506 Hidden Lake Court  
4.4 CITY-ST-ZIP Englewood, FL 34224

TITLE D ☐ DELETE  
NAME SCIORTINO, LUCY  
STREET ADDRESS 1148 ROYAL ROAD  
CITY-ST-ZIP VENICE FL

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME MURRAY, RITA  
STREET ADDRESS 1070 S. VENICE BLVD.  
CITY-ST-ZIP VENICE FL

6.1 TITLE ☐ Change ☐ 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Karl A. King* KARL A. KING

3/24/97 (941)497-2844

Date

Daytime Phone # 0064813

CR2E037 (9/96)