

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

APPROVED  
AND  
FILED

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # N94000002967 (7)  
1. Corporation Name  
FLORIDA JCI SENATORS, INC.

95 FEB -9 PH 1:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
713 S. ORANGE AVE. SARSOTA FL 32436 713 S. ORANGE AVE. SARSOTA FL 32436

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report  
06/15/1994

4. FEI Number  Applied For  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
MERCURIO, JOHN  
713 S. ORANGE AVE.  
SARSOTA FL 32436

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

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, 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAKOS, PETER	1.2 NAME	
STREET ADDRESS	2227 ALPINE AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34239	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLEMENTS, KEN	2.2 NAME	
STREET ADDRESS	3916 N.W. 21ST ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	GAINESVILLE FL 32605	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARKER, JIM	3.2 NAME	
STREET ADDRESS	275 32ND AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32968	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHESLER, PAUL	4.2 NAME	
STREET ADDRESS	8917 92ND ST. NORTH	4.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL 34647	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIPS, MARSHA	5.2 NAME	
STREET ADDRESS	2244 CRYSTAL GROVE LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33801	5.4 CITY-ST-ZIP	
TITLE	SD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACOBS, MARCIA	6.2 NAME	
STREET ADDRESS	11538 7TH LANE NORTH, #1308	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33716	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this filing, or on an attachment thereto, in the address.

SIGNATURE: *[Signature]* Date: Jan 31, 1995 213951  
Signature and typed or printed name of signing officer or director. 6096