

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N94000002967 (7)**

1. Corporation Name  
**FLORIDA JCI SENATORS, INC.**



Principal Place of Business: **713 S. ORANGE AVE. SARASOTA FL 32436**  
Mailing Address: **713 S. ORANGE AVE. SARASOTA FL 32436**

3. Date Incorporated or Qualified: **06/15/1994**  
3a. Date of Last Report: **02/09/1995**  
4. FEI Number: **APPLIED FOR 65-0508833**  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21, 22, 23, 24  
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent  
**MERCURIO, JOHN  
713 S. ORANGE AVE.  
SARASOTA 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 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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating.) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	BAKOS, PETER	
STREET ADDRESS	2227 ALPINE AVE.	
CITY - ST - ZIP	SARASOTA FL 34239	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	CLEMENTS, KEN	
STREET ADDRESS	3916 N.W. 21ST ST.	
CITY - ST - ZIP	GAINESVILLE FL 32605	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	PARKER, JIM	
STREET ADDRESS	275 32ND AVE.	
CITY - ST - ZIP	VERO BEACH FL 32968	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CHESLER, PAUL	
STREET ADDRESS	8917 92ND ST. NORTH	
CITY - ST - ZIP	LARGO FL 34647	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	PHILLIPS, MARSHA	
STREET ADDRESS	2244 CRYSTAL GROVE LANE	
CITY - ST - ZIP	LAKELAND FL 33801	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	JACOBS, MARCIA	
STREET ADDRESS	11538 7TH LANE NORTH, #1306	
CITY - ST - ZIP	ST. PETERSBURG FL 33716	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CLEMENTS, KENNETH	
1.3 STREET ADDRESS	3644 N.W. 33RD TERRACE	
1.4 CITY - ST - ZIP	GAINESVILLE, FL. 32605	
2.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	GARVIN, TERESA	
2.3 STREET ADDRESS	7203 BALBOA ROAD	
2.4 CITY - ST - ZIP	JACKSONVILLE, FL. 32968	
3.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	HANCOCK, ALAN	
3.3 STREET ADDRESS	P.O. BOX 56825	
3.4 CITY - ST - ZIP	JACKSONVILLE, FL. 32241	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information applied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(k), Florida Statutes. I further certify that the information indicated in 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: \_\_\_\_\_ Date: **22 June 1996** Daytime Phone #: **941 953 6096**

CR2E037 (12/95)