

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.**  
**AMOUNT DUE ON OR BEFORE 6/30/95: \$186 (IF DISSOLVED, ADDITIONAL AMOUNT DUE TO SECRETARY: \$200)**

**NONPROFIT CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
 Sylvia B. Myrham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

**DOCUMENT # N94000006072 (2)**

1995 JUL 13 AM 8:50

1. Corporation Name  
**JEFFERSON STREET BABY LAND, INC.**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business <b>328 JEFFERSON STREET DAYTONA BEACH FL 32114</b>	Mailing Address <b>328 JEFFERSON STREET DAYTONA BEACH FL 32114</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>12/12/1994</b>	3a. Date of Last Report
4. FEI Number <b>59-3259331</b>	Applied For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>FILING FEE IS \$61.25</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 <b>328 Jefferson Street</b> Suite, Apt. #, etc. 22	2a. Mailing Address 26 <b>328 Jefferson Street</b> Suite, Apt. #, etc. 27
City & State 23 <b>Daytona Beach, FL</b>	City & State 28 <b>Daytona Beach, FL</b>
Zip 24 <b>32114</b>	Country 25 <b>Volusia</b>
Zip 29 <b>32114</b>	Country 30 <b>Volusia</b>

9. Name and Address of Current Registered Agent

**LOWE, JOAN**  
**520 N RIDGEWOOD AVENUE**  
**DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent

81 Name **Joan Lowe**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**520 N. Ridgewood Avenue**  
 83  
 84 City **Daytona Beach** FL 85 Zip Code **32114**

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]* **Joan Lowe** DATE **6/6/95**

12. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	NAME <b>PATRICK, GLADYS</b>
STREET ADDRESS <b>328 JEFFERSON STREET</b>	CITY - ST - ZIP <b>DAYTONA BEACH FL 32114</b>
TITLE <b>VD</b>	NAME <b>MALONE, EARLENE</b>
STREET ADDRESS <b>328 JEFFERSON STREET</b>	CITY - ST - ZIP <b>DAYTONA BEACH FL 32114</b>
TITLE <b>SD</b>	NAME <b>BIAS, SHIRLEY</b>
STREET ADDRESS <b>328 JEFFERSON STREET</b>	CITY - ST - ZIP <b>DAYTONA BEACH FL 32114</b>
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS **No change**  
 1.4 CITY - ST - ZIP  
 2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS **No change**  
 2.4 CITY - ST - ZIP  
 3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS **No change**  
 3.4 CITY - ST - ZIP  
 4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY - ST - ZIP  
 5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP  
 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Gladys Patrick** DATE **6/6/95** (604) 258-7214

CR2E037 (3/95)