

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT #

1. Corporation Name

N96000002072

Jackson Plaza Cooperative, Inc.

Principal Place of Business

Mailing Address

2250 Edison Avenue
Ft. Myers, FL 33901

same

3. Date Incorporated or Qualified

3a. Date of Last Report

April 17, 1996

N/A

4. FEI Number

Applied For

X

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

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

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Larry Sutton, Treasurer
2424 Jackson St., C214
Ft. Myers, FL 33901

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 N/A

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 President ☐ DELETE

1.1 TITLE

☐ Change ☐ Addition

NAME Debra Burgess
STREET ADDRESS 2250 Edison Ave., A127
CITY-ST-ZIP Ft. Myers, FL 33901

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE Vice President ☐ DELETE

2.1 TITLE

☐ Change ☐ Addition

NAME Gloria Jiles
STREET ADDRESS 2424 Jackson St., C111
CITY-ST-ZIP Ft. Myers, FL 33901

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE Treasurer ☐ DELETE

3.1 TITLE

☐ Change ☐ Addition

NAME Larry Sutton
STREET ADDRESS 2424 Jackson St., C214
CITY-ST-ZIP Ft. Myers, FL 33901

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE Secretary ☒ DELETE

4.1 TITLE

☐ Change ☐ Addition

NAME David Ellison
STREET ADDRESS 2424 Jackson St., C105
CITY-ST-ZIP Ft. Myers, FL 33901

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

NOTE - Replacement members not yet appointed.

TITLE ☒ DELETE

5.1 TITLE

☐ Change ☐ Addition

NAME Jeneva Walker
STREET ADDRESS 2254 Edison Ave., B103
CITY-ST-ZIP Ft. Myers, FL 33901

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100002190941
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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:

Larry Sutton

Larry Sutton

4/8/97

939-4412

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)