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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P06027

J & JD OF JACKSONVILLE, INC.

| FILED |
|-------------------------------|
| Apr 25, 1999 8:00 am |
| Secretary of State |
| 04.05.1000.0004.000.***000.00 |



| Principal Place | e of Business | | Mailing Address | | | | I (Birting: 415 Galla Billt Batta stant cam Arbit ermit er |
|------------------------|--------------------------------|----------------------|--|--------------|--------|------------------|--|
| 1420 BEVERLY | ROAD | | 1420 BEVERLY ROAD | | | | |
| SUITE 330 | | | SUITE 330 | | | | DO NOT WRITE IN THIS SPACE |
| MCLEAN VA 22 | 101 | | MCLEAN VA 22101 | | | | 3. Date Incorporated or Qualifed |
| | | | | | | | 05/15/1985 |
| 2. Principal P | lace of Business | | 2a. Mailing Address | | | | 4. FEI Number Applied For |
| 21 | | | 26 | | | | 58-1567689 Not Applica |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Ad Jitional |
| 22 | | | 27 | | | | 5. Certificate of Status Desired Fee Required |
| City & State | | | City & State | | | | 6. Electior Campaign Financing \$5.00 May Be |
| 23 | | | 28 | | | | Trust Fund Contribution Added to Fees |
| Zip Country Zip | | | — · | Country | | | 8. This corporation owes the current year intangible Personal Property Tax |
| 24 | 25 25 Add | one of Curro | nt Registered Agent | 30 | Т. | | Personal Property Tax. |
| | 9. Name and Add | less of Curre | ill Registered Agent | | 81 | Name | 10. Nume (into Fiduless of Flow Registers Figure |
| DUR | BIN, JAMES E. | | | | | | |
| | ANCHOR DRIVE | | | | 82 | Street Ad- | ddress (P.O. Box Number is Not Acceptable) |
| VERC | D BEACH FL 32963 | | | | 83 | | |
| | | | | | L | | |
| | | | | | 84 | City | F 85 Zip Cc de |
| 11. Pursuant | to the provisions of Se | ctions 607.05 | 02 and 607,1508, Florida Statu | res, the a | bove | e-named co | poration submit; this statement for the nurnose of changing its registers |
| office or r | registered agent, or ho | th in the State | e of Florida. Such change was ations of, Section 607.0505, Fl | a uthorize: | n by | the corporal | ation's board of directors. I hereby accept the app intment as registered |
| _ | in lattillat with, and at | sopt the oblig | dimino or, occident consider, the | ····da Olai | | | |
| SIGNATURE | Signature, typed or printed na | ne of registered age | ent and title if applicable. (NOT | I Registered | 1 Agen | t signature requ | u red when reinstating) DATE |
| 12. | | OFFICERS A | NE DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PD | _ | ☐ DELETE | 1.1 T | | | ☐ Change ☐ Add |
| NAME | DURBIN, JAMES I | | | 1.2 N | | • | |
| STREET ADDRESS | 1420 BEVERLY RI | .)., #330 | | 1.3 S | TREET | ADDRESS | |
| CITY-ST-ZIP | MCLEAN VA | | ☐ DELETE | | ITY-\$ | T-ZIP | ☐ Change ☐ Ado |
| TITLE | S | | □ DEFE1E | 2.1 T | | | _ Onlings |
| NAME | DURBIN, JEAN | . "000 | | 2.2 N | | | |
| STREET ADDRESS | 1420 BEVERLY RI | J., #3 3 0 | | | | ADDRESS | |
| CITY-ST-ZIP | MCLEAN VA | | DELETE | 2.4 C | CITY-S | ST-ZIP | ☐ Change ☐ Ado |
| TITLE | | | _ Jeans | 32 N | | | |
| NAME STREET ADDDESS | | | | | | ADDRESS | |
| STREET ADDRESS | | | | | OTY-S | | |
| CITY-ST-ZIP TITLE | | | ☐ DELETE | 4.1 T | | 1-41 | ☐ Change ☐ Ado |
| NAME | | | | | NAME | | _ · · · · |
| STREET ADDRESS | | | | Ŀ | | TADDRESS . | |
| CITY-ST-ZIP | | | | | TY-S | 1 | |
| TITLE | | | ☐ DELETE | 5.1 T | | 1 21 | Change Add |
| NAME | | | | 5.2 N | | | |
| STREET ADDRESS | | | | 5.3 S | TREET | FADDRESS | |
| CITY-ST-ZIP | | | | 540 | my-s | T- ZIP | |
| TITLE | | | ☐ DELETE | 6.1 T | ITLE | | ☐ Change ☐ Add |
| NAME | | | | 6.2 N | IAME | | |
| STREET ADDRESS | | | | 6.3 S | TREE | TADDRESS | |
| STALL RODING 30 | | | | | fTV-S | | |

14. I herety 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attackiment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)