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CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 27 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P12858

(7)

1. Corporation Name

J.J. TAYLOR COMPANIES, INC.

Principal Place of Business

11780 U.S. HWY 1
SUITE #204
N. PALM BCH FL 33408

Mailing Address

11780 U.S. HWY 1
SUITE #204
N. PALM BCH FL 33408

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/09/1987

3a. Date of Last Report

04/21/1994

4. FEI Number

04-2234512

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

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
PTD
TAYLOR, JOHN J., III
11780 U.S. HWY #1 STE 204
N. PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
FARIA, JOSEPH
203 SEAVIEW AVE.
SWANSEA MA

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
V
DESPLAINES, HENRI
11780 U.S. HWY #1 STE 204
N. PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
TAYLOR, JOHN J. JR.
11780 U.S. HWY #1 STE 204
N. PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
D
ALMEIDA, CECILIA
870 OLD REED RD.
N. DARTMOUTH MA

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 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)(b), Florida Statutes. I further certify that the information included 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 changing. I am attaching with an address

SIGNATURE

Henri J. DesPlaines

Henri J. DesPlaines, Exec.V.P.

4/24/95

407-775-1777