

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P21316 (5)

1. Corporation Name

J.D.H. REALTY, CO.

Principal Place of Business

Mailing Address

11120 MC CANN ROAD  
AMITY OR 97101  
US

11120 MCCANN RD.  
AMITY OR 97101



3. Date Incorporated or Qualified

10/17/1988

3a. Date of Last Report

04/13/1995

4. FEI Number

95-3741574

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC  
1201 HAYES ST  
STE 105  
TALLAHASSEE FL 32301

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
PST  
HARPER, JAMES D., JR.  
STREET ADDRESS  
11120 MCCANN ROAD  
CITY-ST-ZIP  
AMITY OR

TITLE ☐ DELETE

NAME  
D  
HARPER, JAMES D., JR.  
STREET ADDRESS  
11120 MC CANN ROAD  
CITY-ST-ZIP  
AMITY OR

TITLE ☐ DELETE

NAME  
V  
CARTER, CALVIN R.  
STREET ADDRESS  
2496 VIA MARIPOSA  
CITY-ST-ZIP  
SAN DIMAS CA

TITLE ☐ DELETE

NAME  
VAS  
SCHOLTZ, MARITA B.  
STREET ADDRESS  
~~104 GRANDON BLVD., #324~~  
CITY-ST-ZIP  
~~KEY BISCAYNE FL~~

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

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

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

3250 MARY STREET, SUITE 206  
COCONUT GROVE, FL 33133

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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Calvin R. Carter

Date

3/1/96

818/332-3658

Daytime Phone #

CR2E034 (12/95)