## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Aug 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34637

(9)

J.R.G. DEVELOPMENT CORP.

Principal Place of Business Mailing Address											I BIBIN EUEN BIBN	I DIBII REDE
819 MANGROVE POINT ROAD SARASOTA FL 34242				819 MANGROVE POINT ROAD SARASOTA FL 34242-1234								
									3. Dale Incorporated or Qual 07/03/1991		Date of Last F 7/10/1996	Report
2. Principal P	lace of Busi	ness	2a. Ma	2a. Mailing Address					4. FEI Number		A	pplied For
21			26						22-3111222		N	ot Applicable
Suite, Apt.			27 Su	Suite, Apt. #, etc.					5. Certificate of Status Desire	d 🗆		Additional lequired
City & Stat	e		—	City & State					6. Election Campaign Financi	_		May Be
23			28						Trust Fund Contribution	Ц		to Fees
Zip		Country	F	Zip Countr			/		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	9. Name	25 and Address of Curre	29   ent Registere	d Agent	30	T			Florida Statutes  10. Name and Address of Ne			
UVD	NER, LEON					81	Nam	e	191 110 1110 1110 1110	g.o.o.o.o.		
		E POINT ROAD		ļ								
SARASOTA FL 34242-1234							Stree	t Addres	ess (P.O. Box Number is Not Acceptable)			
ONIMOUTH TE OFERE 1204									······································			
							0.4				Ta=1 7:-	0-1-
						84	City			FI	L 85 Zip	Code
11. Pursuant	to the provis	sions of Sections 607.05	02 and 607.1	1508, Florida Statut	es, the a	bov	e-name	d corpo	ration submits this statement for	the purpose	of changing i	ts registered
agent. I a	regi <b>ste</b> red aç am <b>fam</b> iliar w	gent, or boin, in the star ith, and accept the obli	gations of, Sc	such change was r ection 607.0505, Fli	aumonze orida Sta	a by tutes	y ine co s.	ирогацо	n's board of directors. I hereby	accept the ap	pointment as	; registerea
SIGNATURE												
<b>43</b>	Signature, typico	d or printed name of registered a					ent signal	re required		DATE		
12.	1 888	OFFICERS A	ND DIRECTO		13.				ADDITIONS/CHANGES TO	OFFICERS AN		· · · · · · · · · · · · · · · · · · ·
TITLE	PDS	LEONADD W		☐ DEFELE	1,1 Ti						L Change	Addition
NAME GARNER, LEONARD W STREET ADDRESS 819 MANGROVE POINT ROAD			`	1.2 NA								
STREET ADORESS	SARASO		,				ADDRES:	·				
CITY-ST-ZIP TITLE	SANASU	INTL		DELETE	1.4 Ci 2.1 Ti		ST-ZIP				Change	Addition
NAME				<u></u> oreer	2.2 N						□ onenge	L] Addition
STREET ADDRESS							ADDRESS					
								<b>'</b>				
CITY-ST-ZIP TITLE				DELETE	3.1 70		ST-ZIP	+			Change	Addition
NAME				<del></del>	3.2 N							
STREET ADDRESS							ADDRES	;				
CITY-ST-ZIP							ST-ZIP					
TITLE				☐ DELETE	4.1 TI						Change	☐ Addition
NAME				4. 2 N			4. 2 NAME					
STREET ADDRESS					4.3 S	IREET	ADDRES	;				
CITY-ST-ZIP							ST-ZIP					
TITLE		<del>.</del>		DELETE	5.1 TI	TLE					Change	☐ Addition
NAME					5.2 N	AME						
STREET ADDRESS					5.3 S	TREET	ADDRESS	;				
CITY-ST-ZIP					5.4 C	ITY-S	ST- ZIP					
TITLE				DELETE	6.1 TI	TLE					Change	☐ Addition
NAME					6.2 N	AME						
STREET ADDRESS					6.3 S	REET	ADDRES:	;				1

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or chapter 607.

6.4 CITY - ST - ZIP