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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

P9200005492 (3)

JOPA ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 13 1998 8:00am Secretary of State

4800



7101-31 CYPRESS LAKE DR. 7101-31 CYPRESS LAKE DR. FT. MYERS FL 33907 FT. MYERS FL 33907 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/16/19</u>92 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **LUNDQUIST. VERNON** 7101-31 CYPRESS LAKLE DR. 82 Street Address (P.O. Box Number is Not Acceptable) FT. MYERS FL 33907 83 84 City 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 profed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change ☐ Addition **GOODING, BRENDA J** NAME 12 NAME STREET ADDRESS 10265 GANDY BLVD #1316 1.3 STREET ADDRESS **ST. PETERSBURG FL 33702** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE ☐ Change ☐ Addition NAME CRITTENDEN, PATI K 2.2 NAME STREET ADDRESS **3010 BRITTANY LN** 2.3 STREET ADDRESS **TEXARKANA TX 75503** CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP LUNDQUIST VERNON DELETE
7101-31 CYPRESS LAME DR. TITLE Change 3.1 TITLE Addition NAME 3.2 NAME FORTMYERS, FL STREET ADDRESS 33907 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITL F DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I 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 empowerence 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 of the corporation of the corpora