

**CORPORATION
ANNUAL REPORT
1995**

**Florida Department of State
Secretary of State
DIVISION OF CORPORATIONS**

FILED

95 MAY -1 AM 8:40

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P93000011087 (2)

1. Corporation Name

JBECK INDUSTRIES, INC.

Principal Place of Business

**33920 US HIGHWAY 19 N
SUITE 200
PALM HARBOR FL 34684**

Mailing Address

**33920 US HIGHWAY 19 N
SUITE 200
PALM HARBOR FL 34684**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/12/1993

3a. Date of Last Report

08/19/1994

4. FEI Number

APPLIED FOR 59-3296695

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21. 12718 Forest St.

2a. Mailing Address

22. 12718 Forest St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23. TAMPA FLORIDA

City & State

28. TAMPA Florida

Country

24. 33612

Country

25. USA

Country

29. 33612

Country

30. USA

9. Name and Address of Current Registered Agent

**DICKINSON, ROBERT C III
33920 US HIGHWAY 19 N
SUITE 200
PALM HARBOR FL 34684**

10. Name and Address of New Registered Agent

81. Name

William M. Dunbar

82. Street Address (P.O. Box Number is Not Acceptable)

13809 N. Edison Avenue

83.

84. City

Tampa

FL

85. Zip Code

33613

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

William M. Dunbar

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

(NOTE: Registered Agent signature required when reappointing)

4-27-95

DATE

12. OFFICERS AND DIRECTORS

**TITLE PSD
NAME DICKINSON, ROBERT C III
STREET ADDRESS 33920 US HIGHWAY 19 N SUITE 200
CITY- ST- ZIP PALM HARBOR FL 34684**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PTD** ☒ Change ☐ Addition

**12 NAME William M. Dunbar
13 STREET ADDRESS 13809 N. Edison Ave.
14 CITY- ST- ZIP TAMPA FL 33613**

2.1 TITLE **PTD** ☒ Change ☐ Addition

**22 NAME Dale Alford
23 STREET ADDRESS 196-20 ST. S.E.
24 CITY- ST- ZIP Largo, FL 34641**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY- ST- ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY- ST- ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY- ST- ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY- ST- ZIP ☐ Change ☐ Addition

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 appeared in Block 12 or Block 13 if changed, or on an attachment with no additions.

SIGNATURE:

William M. Dunbar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95

7813 545-9757

Daytime Phone #