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May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000015262 (7)

1. Corporation Name
RESERVE CORPORATION

Principal Place of Business

4500 SALISBURY ROAD
JACKSONVILLE FL 32216

Mailing Address

4500 SALISBURY ROAD
JACKSONVILLE FL 32216-8032



3. Date Incorporated or Qualified
03/01/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
59-3168877

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 SOUTH 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME PAPPA, JOHN
STREET ADDRESS 1 JOHNSON & JOHNSON PLAZA
CITY-ST-ZIP NEW BRUNSWICK NJ 08903

TITLE D
NAME FISHMAN, LESLIE
STREET ADDRESS 1 JOHNSON & JOHNSON PLAZA
CITY-ST-ZIP NEW BRUNSWICK NJ 08903

TITLE D
NAME MEEK, GERALD R
STREET ADDRESS 4500 SALISBURY RD, #574
CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE D
NAME SHORT, HELEN E
STREET ADDRESS 4500 SALISBURY RD. #574
CITY-ST-ZIP JAX FL

TITLE D
NAME KUNKLE, GERALD K
STREET ADDRESS 4500 SALISBURY RD. #574
CITY-ST-ZIP JAX FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Daretta, R.J.
1.3 STREET ADDRESS 1 Johnson & Johnson Plaza
1.4 CITY-ST-ZIP New Brunswick, NJ 08933

2.1 TITLE O
2.2 NAME Callahan, J.M.
2.3 STREET ADDRESS 4500 Salisbury Rd #574
2.4 CITY-ST-ZIP Jacksonville, FL 32216

3.1 TITLE O
3.2 NAME Reilly, M. P.
3.3 STREET ADDRESS 1 Johnson & Johnson Plaza
3.4 CITY-ST-ZIP New Brunswick, NJ 08933

4.1 TITLE O
4.2 NAME Stern, S.
4.3 STREET ADDRESS 1 Johnson & Johnson Plaza
4.4 CITY-ST-ZIP New Brunswick, NJ 08933

5.1 TITLE D
5.2 NAME Pappa, John
5.3 STREET ADDRESS 1 Johnson & Johnson Plaza
5.4 CITY-ST-ZIP New Brunswick, NJ 08933

6.1 TITLE D
6.2 NAME Fishman, Leslie
6.3 STREET ADDRESS 1 Johnson & Johnson Plaza
6.4 CITY-ST-ZIP New Brunswick, NJ 08933

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 if changed, or on an attachment with an address.

SIGNATURE:

Gerald R. Meek 4/2/97

CR2E034 (9/96)