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

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9
1. Corporation Name
RESERVE CORPORATION P93000015262 (7)

FILED May 12 1998 8:00am Secretary of State

	——————————————————————————————————————					
Principal Place of Business Mailing Address					A CONTRACTOR OF THE PROPERTY O	(1881 91116 41919 Stirle (181196)
4500 SALISBURY ROAD 4500 SALISBURY ROAD JACKSONVILLE FL 32216 JACKSONVILLE FL 32216						
SACROCTIVIL	TE LT SESIO	DACKSONVILLE FL 3	2210		DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified	
					03/01/1993	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-3168877	Not Applicable
Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State 27 City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	'y	8. This corporation owes or has paid the o	
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	g. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registere	d Agent
	CORPORATION SYSTEM		81	1 Name		ļ.
1200 BOUTH PINE ISLAND ROAD			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324						
			83	³		ı
			84	1 City		B5 Zip Code
				<u> </u>	F	
office or r	registered agent, or both, in the Stat	te of Horida. Such ch ange w	ras authorized b	by the corpo	corporation submits this statement for the purpose pration's board of directors. I hereby accept the a	of changing its registered poointment as registered
agent. I a	am familiar with, and accept the obt	igations of, Section 607.0505	, Florida Statute	∌\$.		
SIGNATURE						
12.	Signature, typed or puried name of registered a	ND DIRECTORS	(NOTE Hogistored Ag	jont signature re	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12
TITLE	D	DELETE			AS	Change K Addition
NAME PAPPA, JOHN			1.2 NAME	1 _ ' _		
STREET ADDRESS 1 JOHNSON & JOHNSON PLAZA				FT ADDRESS	1 Johnson & Johnson Plaza	1
CITY-ST-ZIP	NEW BRUNSWICK NJ		1.4 CITY-	Į.	New Brunswick, New Jersey	
TITLE	ס	DELETE			AS	☐ Change K Addition
NAME	FISHMAN, LESLIE		2.2 NAME	. [
STREET ADDRESS 1 JOHNSON & JOHNSON PLAZA			2.3 STREE	1 Address	Reilly M. P. 1 Johnson & Johnson Plaza	1
CITY-ST-ZIP	NEW BRUNSWICK NJ		2. 4 CITY	- ST - ZIP	New Brunswick, New Jesrey	/ 08933
TITLE	0	☐ DELETE	31 TITLE		S	Change Addition
NAME	MEEK, GERALD R		3.2 NAME	.	Stern, S.	
STREET ADDRESS			3.3 STREE	ET ADDRESS	1 Johnson & Johnson Plaza	
CITY-ST-ZIP	JACKSONVILLE FL 32216		3.4. CITY		New Brunswick, New Jersey	08933
TITLE	D OLIOPA HELEN E	☐ DELETE		í	·	Change Addition
NAME	SHORT, HELEN E	•	. 4. 2 NAM	- I		
STREET ADDRESS		ŀ		1 ADDRESS		
CITY-ST-ZIP	JAX FL	Li pereve	4.4 CiTY-			Ohann Didde
TITLE	DADCTTA D I	DELETE	- 8	- 1		Change Addition
NAME	DARETTA, R J 1 JOHNSON & JOHNSON F	DI A7A	5.2 NAME	1		
STREET ADDRESS	NEW BRUNSWICK NJ	runun.		ET ADDRESS		
CITY+ST-ZIP	D DEW BRUNSWICK NO	DELETE	5.4 CITY-			Change Addition
TITLE	CALLAHAN, J M	☐ DELETE	6.1 TITLE 6.2 NAME			□ cuange □ Man(tab
NAME			6.2 NAME			
STREET ABBRESS	4500 GALISRUDY DOAD 46	\$7 <i>4</i>	C 0 07055	TARRECC		
STREET ADDRESS CITY-ST-ZIP	4500 SALISBURY ROAD, #9	574	6.3 STREE 6.4 City -	ET ADDRESS		

indicated on this annual report or supplemental arms along the time 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.

1/30/08

904-296-2005