

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

FILED  
May 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000028983 (3)

1. Corporation Name

JACKSON TOTAL SERVICE, INC.

Principal Place of Business

Mailing Address

3727 ENTERPRISE AVE  
NAPLES FL 33942  
US

PO BOX 9589  
NAPLES FL 33941  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1993

4. FEI Number

65-0406161

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PASTIAN, RUBEN  
3727 ENTERPRISE AVE  
NAPLES FL 33942

81. Name

Pastian, Ruben

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

3727 Enterprise Ave

83.

84. City

Naples

FL

85. Zip Code

34104

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VSD  
NAME ABBOTT, RICHARD R  
STREET ADDRESS 256 PEBBLE BEACH CIR  
CITY-ST-ZIP NAPLES FL

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

D  
ABBOTT, RICHARD R  
256 PEBBLE BEACH CIR  
NAPLES FL 34113

☒ Change

☐ Addition

TITLE PTD  
NAME PASTIAN, RUBEN  
STREET ADDRESS 1063 29TH AVE N  
CITY-ST-ZIP NAPLES FL

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD  
NAME RINGO, NEILISA  
STREET ADDRESS 123 FOX GLEN DRIVE  
CITY-ST-ZIP NAPLES FL

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

VSD  
Ringo, Neilisa  
123 Foxglen Dr  
Naples FL 34104

☒ Change

☐ Addition

TITLE D  
NAME WEITHMAN, GILBERT  
STREET ADDRESS 6000 PELICAN BAY BLVD  
CITY-ST-ZIP NAPLES FL 33963

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME JACKSON, PAUL DEAN  
STREET ADDRESS 310 BURNING TREE DRIVE  
CITY-ST-ZIP NAPLES FL

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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:

Michael A. Pinner

Michael A. Pinner

Naples

404-643-0923

CR2E034 (10/97)