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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000046417 (0)

1. Corporation Name

JOSEPH S. LEE, INC.



Principal Place of Business

3220 E. STATE RD. 200
YULEE FL 32097

Mailing Address

3220 E. STATE RD. 200
YULEE FL 32097

3. Date Incorporated or Qualified

06/25/1993

3a. Date of Last Report

10/09/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE, JOSEPH S JR
2050 HWY A1A
YULEE FL 32097

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 607.1504, 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 607.0504, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and if that applies

Printed Name of Agent (Signature required when filing change)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME LEE, JOSEPH S SR
STREET ADDRESS 3220 E. STATE RD. 200
CITY-ST-ZIP YULEE FL 32097 ☐ DELETE

TITLE DVST
NAME LEE, JOSEPH S JR
STREET ADDRESS 3220 E. STATE RD. 200
CITY-ST-ZIP YULEE FL 32097 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DVST
1.2 NAME JOSEPH S. LEE SR
1.3 STREET ADDRESS 3220 E. STATE RD 200
1.4 CITY-ST-ZIP Yulee FL 32097 ☒ Change ☐ Addition

2.1 TITLE DP
2.2 NAME JOSEPH S. LEE JR
2.3 STREET ADDRESS 3220 E. STATE RD 200
2.4 CITY-ST-ZIP Yulee FL 32097 ☒ Change ☐ Addition

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

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTONA PLACE #

CR2E034 (12/95)