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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P93000048367 (5)

J.D. INVESTMENTS, INC.					
				* 1831/200 JUNE 1444 BUT OF BUT OF THE PROPERTY OF THE PROPERT	
Principal Place of Business Mailing Address				1 terrinnet ein eintale jatte fielle Woltt aufbi dentit diffel	CANAD CITIO COLL SEEL SEEL
227 HARRISON AVE. 227 HARRISON AVE.					
PANAMA CITY FL 32401 PANAMA CITY FL 32401				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	PAGE
				07/09/1993	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21			59-3201197	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 27			5. Certificate of Status Desired	Fee Required	
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the curre	
24	25	29	30		Yes No
Name and Address of Current Registered Agent				10. Name and Address of New Registered A	gent
G	ORDON, BRUCE H		81 Name	1	
SHUMAKER LOOP & KENDRICK			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
101 E. KENNEDY BLVD., #2500					
TAMPA FL 33602			83		
į			84 City		85 Zip Code
ļ				FL	]   '   1
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.					
agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registered agen		: Registered Agent signature requir	4 -	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND I	
TITLE	D	☐ DELETE	1.1 TITLE	L	Change Addition
NAME	DARRAH, JOHN W		1.2 NAME		
STREET ADDRESS	227 HARRISON AVE.		1.3 STREET ADDRESS		į
CITY-ST-ZIP	PANAMA CITY FL 32401		1,4 City-St-Zip		
TATLE		DELETE	2.1 TITLE	Ł	_ Change _ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		İ
C:TY-ST-ZIP			2. 4 CITY-ST-ZIP		To
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NAME			3.2 NAME		
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NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	1	
CITY-ST-ZIP		[ ] program	5.4 CITY-ST-ZIP		100
TITLE		☐ DELETE	6.1 TITLE	L	Change   Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Ì

SIGNATURE:

ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an date empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**FILED** 

Feb 02 1998 8:00am

Secretary of State

850-784-3900