## 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 # P93000084775 (4)

T & J OPERATING COMPANY

Principal Place of Business	Mailing Address
5585 OVERSEAS HWY	P.O. BOX 1226

**FILED** Feb 20 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			1 10011001 110100 11111 000111				
5585 OVERSEAS HWY P.O. BOX 1226									
MARATHON FL 33050 MARATHON		MARATHON FL 33950	THON FL 33950		DO NOT	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qua		DI AOL		
					12/13/1993				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ar	plied For	
21		26			65-0454309		<del></del>	t Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75		
27		5. Certificate of Status Desire	ed 🗆	Fee Re					
	City & State City & State		6. Election Campaign Finance	sing	\$5.00	May Be			
23		28		Trust Fund Contribution	Ĭ 🛛	Added 1			
Zip	Country	Zip	Count	ту	8. This corporation owes or	nas paid the cui	rrent year Int	angible	
24	25	29	10		Personal Property Tax due	a June 30.	Yes [	No No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of N	aw Registered	Agent		
GIL	MORE, TIM A		8	1 Name	•				
	45 100TH ST		l i	2 Street	Address (P.O. Box Number is Not Ac	ceptable)			
	RATHON FL 33050		آ ا	_					
			8	3					
			يا ا	4 City			85 Zip (	Code	
						FL	. 11		
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 ag	<u> </u>		gent signatu	re required when reinstating)	DATE	- FIREOTOF	0.01.40	
12.		ID DIRECTORS	13.	<del> </del>	ADDITIONS/CHANGES TO	OFFICERS AND	Change	Addition	
TITLE	D CHAODE THE A	DELETE	1.1 TITLE				L.) Change	L Addition	
NAME	GILMORE, TIM A		1.2 NAM						
STREET ADDRESS	1045 100TH ST			et address					
CiTY-ST-ZIP	MARATHON FL 33050	DELETE		- ST - ZIP			Change	Addition	
TITLE	D CHAODE HIDITA	☐ DELETE	21 TITLE				Change	C KOOIIION	
NAME	GILMORE, JUDITH		2.2 NAM					1	
STREET ADDRESS	1045 100TH ST			et address				ļ	
CITY-ST-ZIP	MARATHON FL 33050	Devete	_	-ST-ZIP	<u> </u>		Change	Addition	
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME			3.2 NAM					ļ	
STREET ADDRESS				et address				İ	
CITY-ST-ZIP		T beiege	-	'- \$T - ZIP	<u> </u>		Change	Addition	
TITLE		☐ DELETE	4.1 TITLE				Change	- Addition	
NAME			4. 2 NAN					[	
STREET ADDRESS				et address				-	
CITY-ST-ZIP		The second	4.4 CITY				T Observed	- Laidhin	
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition	
NAME			5.2 NAM						
STREET ADDRESS			5.3 STRE	ET ADDRESS				ļ	
CITY-ST-ZIP			5.4 CiTY				П.		
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition	
NAME			6.2 NAM						
STREET ADDRESS			6.3 STRE	ET ADDRESS					
CITY-ST-ZIP			6.4 CITY			<del></del>	. 47 15 - 4 21	(.4	
14 I hereby c	entity that the information cumplied u	with this filling does not qualify for	the even	intion stat	led in Section 119.07(3)(i). Florida Stat	ares. Liuriber če	ani iani vune	intormation L	

indicated on this annual report or supplied with rins limity does not qualify in the exemption stated in Section 119.07(3)(). Florida Statutes. I further certify that the informatic 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 entities.