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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400000650 (9)

EZZELL ENTERPRISES, INC.

Principal Place of Business

MANUSTINE DO

Mailing Address

1101R-128 OLD ST. AUGUSTINE RD

FILED Apr 29 1997 8:00am Secretary of State



JACKSONVILLE	FL 32257	JACKSONVILLE FL 3	257-1024					
					3. Date incorporated or Qualified 12/23/1993	3a. Date of 04/23/		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied f	For
21		26			59-3214329		Not Appl	licable
Suite, Apt	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		3.75 Addition Fee Required	
City & State		City & State		· · ·	Election Campaign Financing Trust Fund Contribution		5.00 May 8 Added to Feet	
Zio	Country	Zip	Country	······································	8. This corporation has liability for it			
24	25	29	30			Yes 🔲 No		
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agen	t	
	'ELL, JOSEPH W		81	Name				
	18-128 OLD ST. AUGUSTINE	E RO	82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
JAC	KSONVILLE FL 32257							
			83					
			84	City		FL 85	Zip Code	
11. Pursuant t	to the provisions of Sections 607	.0502 and 607.1508, Florida St	atutes, the above-	named cor	poration submits this statement for the p		nging its regis	stered
office or re	egistered agent, or both, in the S	State of Florida, Such change w	as authorized by I	he corpora	poration submits this statement for the pation's board of directors. I hereby accep	t the appointm	ent as registe	ered
agencia	or ranks with and accept the c	Tection do 1.050	Sent 11	1570	(E()	4/18/97		
SIGNATURE	Signator typied it printed name of registers	ad Joint and title if applicable	Seph W, (NOTE Registered Agent	signature regu	ired when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTORS IN 1	12
184	P	☐ DELETE	1.1 TITLE				Change A	Addition
NAME	EZZELL, JOSEPH W.		1.2 NAME					
STREET ADDRESS	1088 NATURES HAMMOC	K RD., N.	1.3 STREET A	DDRESS				
CHY-\$1-Z#	JACKSONVILLE FL		1.4 CITY-ST-	ZIP				
THILE	ST	☐ DELETE	2.1 TITLE				change 🔲 A	Addition
NAME	EZZELL, PATRICIA W.		2.2 NAME	İ				
STHEET ADDRESS	1088 NATURES HAMMOC	K RD., N.	23 STREET A	DDAESS				
CITY - \$1 - 761	JACKSONVILLE FL		2 4 CITY-ST	-2IP			'm ;	
19 ₄ F	D AMEDICA	L) DELETE	DELETE 31 TITLE		•	ж <u>П</u>	Change 🔲 A	Addition
NAME.	EZZELL, MARY A.	W DD N	3.2 NAME					
SIREFT ADDRESS	1088 NATURES HAMMOC JACKSONVILLE FL	K ND., N.	3.3 STREET A	1				
CHY-S1-ZIP TIBLE	JAUNOUNVILLE FL	DELETE	3.4 CITY-ST 4.1 TITLE	- ZIP		777	Change A	Addition
NAVE		DECLE	4.7 TILE 4. 2 NAME				rango L. Jr	NONIO
STREET ADDRESS			4.2 NAME 4.3 STREET A	DDDEGG				
City - S1 - ZIP			4.3 STREET A	ļ				
Tille		DELETE	5.1 TITLE	L.17		TT C	Change A	Addition
NAM:			5.2 NAME		•		• •	
STREET ADDRESS			5.3 STREET A	DDRESS				
C-TY - ST - ZiP			5.4 CHTY-ST					
1011	10. U.S.	DELETE	6.1 TITLE				Change A	Addition
N4Mi			6.2 NAME					
STREET ACORESS			6.3 STREET A	DDRESS				
Crt st ZIP			6.4 CITY - ST-	- 1				
3 2 2 1 1 1			0.4 0111.31.	4-11		•		

I do 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.