

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAY -1 PH 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3-1-95 8-50496
CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # P94000025780 (5)

1. Corporation Name

JERI JORDAN, P.A.

Principal Place of Business Mailing Address
110 ROYAL PARK DR.
APT. 1D
OAKLAND PARK FL 33309

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APT. 1D
OAKLAND PARK FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/30/1994 3a. Date of Last Report
4. FEI Number 65-0479827 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 2040 N.W. 70th AVE 26 2040 N.W. 70th AVE
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 SUNRISE, FL 27
City & State City & State
23 33313 USA 28 SUNRISE, FL
Zip Country Zip Country
24 25 29 33313 30 USA

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
SWART, HARRY J
921 N. MAIN ST.
SUITE 203-
KISSIMMEE FL 34744

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
717 East Oak Street
83
84 City Kissimmee FL 85 Zip Code 34744

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 of person named as registered agent in the "Block 9" _____ Signature of person named as new registered agent in the "Block 10" _____

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE NAME STREET ADDRESS CITY, ST, ZIP	D JORDAN, JERI 110 ROYAL PARK DR., 1D OAKLAND PARK FL 33309	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	☒ Change ☐ Addition 2040 N.W. 70th AVE SUNRISE, FL 33313
2. TITLE NAME STREET ADDRESS CITY, ST, ZIP		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	☐ Change ☐ Addition
3. TITLE NAME STREET ADDRESS CITY, ST, ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	☐ Change ☐ Addition
4. TITLE NAME STREET ADDRESS CITY, ST, ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	☐ Change ☐ Addition
5. TITLE NAME STREET ADDRESS CITY, ST, ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	☐ Change ☐ Addition
6. TITLE NAME STREET ADDRESS CITY, ST, ZIP		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 199.02(3)(b), 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 as an addendum with an address.

SIGNATURE:

Jeri Jordan
SIGNATURE AND TYPED OR PRINTED NAME OF BOHING OFFICER OR DIRECTOR

4/26/95 (305) 749-5099