

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

CORPORATION  
ANNUAL REPORT  
1995



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

**APPROVED  
AND  
FILED**

95 MAY -1 AM 9:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000027136**

1. Corporation Name  
**JACKSONVILLE CENTER, INC.**

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **1 IMESON PARK BLVD. BUILDING 100 JACKSONVILLE, FL 32218**  
Mailing Address: **1 IMESON PARK BLVD. BUILDING 100 JACKSONVILLE, FL 32218**

3. Date Incorporated or Qualified: **APRIL, 1994** 3a. Date of Last Report: **N/A**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. <b>1 IMESON PARK BLVD.</b>	26. <b>1 IMESON PARK BLVD.</b>	<b>593288511</b>	<input type="checkbox"/> Not Applicable
22. <b>BUILDING 100</b>	27. <b>BUILDING 100</b>	5. Certificate of Status Desired	<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
23. <b>JACKSONVILLE, FLORIDA</b>	28. <b>JACKSONVILLE, FLORIDA</b>	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
24. <b>32218</b>	25. <b>DUVAL</b>	29. <b>32218</b>	30. <b>DUVAL</b>
7. This corporation has liability for providing tax under S. 139.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent										
<b>ARIS NEWTON 1 IMESON PARK BLVD. BUILDING 100 JACKSONVILLE, FLORIDA 32218</b>	<table border="1"> <tr><td>81</td><td>Name</td></tr> <tr><td>82</td><td>Street Address (P.O. Box Number is Not Acceptable)</td></tr> <tr><td>83</td><td></td></tr> <tr><td>84</td><td>City</td></tr> <tr><td>85</td><td>Zip Code</td></tr> </table>	81	Name	82	Street Address (P.O. Box Number is Not Acceptable)	83		84	City	85	Zip Code
81	Name										
82	Street Address (P.O. Box Number is Not Acceptable)										
83											
84	City										
85	Zip Code										

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, as 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: **ARIS NEWTON - PRESIDENT** APRIL 4, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PRESIDENT</b>	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARIS NEWTON</b>	12 NAME	
STREET ADDRESS	<b>13700 SUTTON PARKE DR. APT#126</b>	13 STREET ADDRESS	
CITY, ST, ZIP	<b>JACKSONVILLE, FLORIDA 32224</b>	14 CITY, ST, ZIP	
TITLE	<b>SECRETARY/TREASURER</b>	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PARK NEWTON</b>	22 NAME	
STREET ADDRESS	<b>100 NORTH TAMPA STREET, SUITE# 3575</b>	23 STREET ADDRESS	
CITY, ST, ZIP	<b>TAMPA, FLORIDA 33602</b>	24 CITY, ST, ZIP	
TITLE	<b>DIRECTOR</b>	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAREY WEBB</b>	32 NAME	
STREET ADDRESS	<b>100 NORTH TAMPA STREET, SUITE#3575</b>	33 STREET ADDRESS	
CITY, ST, ZIP	<b>TAMPA, FLORIDA 33602</b>	34 CITY, ST, ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 CITY, ST, ZIP	

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14. I hereby certify that the information furnished with this filing is substantially true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the recipient of trustee empowered to execute this report as required by Chapter 407, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: **ARIS NEWTON - PRESIDENT** APRIL 4, 1995 (904) 696-3407