

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **P94000029901 (3)**  
1. Corporation Name  
**J.G.S., INC.**

Principal Place of Business

**541 E MONROE ST  
JACKSONVILLE FL 32202**

Mailing Address

**541 E MONROE ST  
JACKSONVILLE FL 32202**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 **687 JAMESTOWN BLVD**

Suite, Apt. #, etc.

27 **# 1004**

28 City & State

**ALTAMONTE SPRINGS**

29 Zip

**FL 32714**

30 Country

**U.S.**

9. Name and Address of Current Registered Agent

**GEIER, SIEGFRIED J.  
687 JAMESTOWN BLVD, #1004  
ALTAMONTE SPRINGS FL 32714**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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, 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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE

NAME **GEIER, SIEGFRIED J**  
STREET ADDRESS **451 E ALTAMONTE DRIVE #869**  
CITY-ST-ZIP **ALTAMONTE SPRINGS FL**

TITLE **D** ☒ DELETE

NAME **KEESS-GEIER, EDITH H**  
STREET ADDRESS **451 E ALTAMONTE DRIVE #869**  
CITY-ST-ZIP **ALTAMONTE SPRINGS FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS **GEIER, SIEGFRIED J.**  
1.4 CITY-ST-ZIP **687 JAMESTOWN BLVD, #1004**

2.1 TITLE **D** ☒ Change ☐ Addition

2.2 NAME **KEESS-GEIER, EDITH H**  
2.3 STREET ADDRESS **687 JAMESTOWN BLVD #1004**  
2.4 CITY-ST-ZIP **ALTAMONTE SPRINGS, FL, 32714**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I 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.

SIGNATURE:

*Sandra B. Mortham* 7/29/98

7-29-98 407-682-5778

FILED

98 AUG 24 PM 1:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/19/1994**

4. FEI Number

**59-3243698**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

CR2E034 (5/98)

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**J.G.S. Inc.**  
**687 Jamestown Blvd. Suite 1004**  
**Altamonte Springs, FL 32714**

**Division of Corporations**  
**Annual Reports Filings**  
**PO Box 1500**  
**Tallahassee FL 32302-1500**

**Document # P94000029901 (3)**  
**FEI No. 59-3243698**

**July 30 1998**

**Dear Ladies and Gentlemen,**

**I have just received the 2<sup>nd</sup> Notice of my Corporate Annual Report. My Principal, David R. Fletcher received my first notice and unfortunately he mailed it to an incorrect address. Maybe it was lost in the mail because it was not returned to Mr. Fletcher's office.**

**As you know the 2<sup>nd</sup> Notice includes a substantial late fee, which I cannot afford at this time. Please try to understand I would not have deliberately missed the proper filing deadline, especially since I cannot afford the extra expense at this time. Obviously I must find a more dependable attorney. Regardless, I sincerely apologize for the tardiness and I humbly ask your forgiveness and hope you can find a way to waive the penalty for me.**

**I have changed my mailing address on the report to prevent this from happening again. Also I have enclosed a check for \$ 150.00 along with the letters and postmarked envelope from my attorney so you can see my story is true. I truly appreciate your kind consideration.**

**Sincerely**



**Siegfried J. Geier**  
**President**  
**J.G.S. Inc.**

**Enclosures**