2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 06, 2004 8:00 am ..., Secretary of State

05-06-2004 90185 040 ***150.00

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1. Entity Name

6677-7 103RD ST. JACKSONVILLE, FL 32210

4 JAX ENTERPRISES, INC.



Mailing Address Principal Place of Business

P.O. BOX 30115

DOCTORS INLET, FL 32030





DO NOT WRITE IN THIS SPACE

CR2E034 (10/03) 02192004 No Chg-P

4. FEI Number 59-3247729 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Davime Phone #

6. Name and Address of Current Registered Agent

SMITH, CHRISTOPHER A 7223 STATE ROAD 52, SUITE 1 HUDSON, FL 34667

DO NOT WRITE INI THIC CDACE

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			•		
	named entity submits this statement for the pions of registered agent.	urpose of changing its registered	office or registe	ered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and fitte it	applicable: (NOTE: Registered A	gent signature require	ed when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Financi Trust Fund Contribution.		5.00 May Be ded to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE	DP			•	•
NAME	GERMAIN, GERALD V				
STREET ADDRESS	1703 PELICAN PLACE			•	
CITY-ST-ZIP	MIDDLEBURG, FL 32068				
TITLE	DVT		•		
NAME	SMITH, CHRISTOPHER A				
STREET ADDRESS	7511 WESTSHORE DR	i i		•	
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652				
TITLE	DS 🔆 ·			,	
NAME	GERMAIN, MICHELLE P	,		;	
STREET ADDRESS	1703 PELICAN PLACE			DO N	OT WRITE
CITY-ST-ZIP	MIDDLEBURG, FL 32068				
TITLE	DVP	· .		IN TH	IIS SPACE
NAME	WRUBEL, MICHAEL]		***	100.7.55
STREET ADDRESS	11045 KNOTTINGBY				_
CITY-ST-ZIP	JACKSONVILLE, FL 32257				·
TITLE	;				
NAME				÷	
STREET ADDRESS		I I		*	
CITY-ST-ZIP					
TITLE				•	
NAME					
STREET ADDRESS		I			•
CITY-ST-ZIP					
indicated of the cor	or, this report or supplemental report is true a	nd accurate and that my signatur I to execute this report as required	e shall have the	e same legal effect as i	orida Statutes. I further certify that the information if made under oath; that I am an officer or director d that my name appears in Block 10 or Block 11 if

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR