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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P9400038576 (2)

M. W. JEFFCOAT, INC.

## **FILED** May 01 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address						*** **** ****	
2204 TURNBRI		2204 TURNBRIDGE CT							
TALLAHASSEE	FL 32311	TALLAHASSEE FL 32011			DO NO	DO NOT WRITE IN THIS SPACE			
1					3. Date Incorporated or Q	·	JI AUL		
					05/23/1994				
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		I A	pplied For	
21 1531	DELAWARE AUR	26 1532 DAL	AWAK	IL AU	/c 59-3248684		_ <del>                                    </del>	ot Applicable	
Suite, Apt. #		Suite, Apt. #, etc.				🗂		Additional	
22		27			5. Certificate of Status De	sired		equired	
City & State		City & State			6. Election Campaign Fina	6. Election Campaign Financing \$5.00 May Be			
23 JACKE	Country Country	28 JACKSOUVI	un	PL	Trust Fund Contribution		Added to Fees		
Zip .	Country	Zip	Cou		g. This corporation owes of	or has paid the cun	ent year In	tangible	
24 322		29 32410	30	DUVAL				No	
	g. Name and Address of Current	Registered Agent		81 Name	10. Name and Address of	New Registered	Agent		
SELLOOM! MAHOUNG II								j	
2204 TURNBRIDGE CT				82 Street Address (P.O. Box Number is Not Acceptable)					
TALLANASSEE FL 32311									
			}	83				ļ	
				84 City			<b>85</b> Zip	Code	
				0,		FL		0000	
11, Pursuant to	o the provisions of Sections 607,0502 gistered agent, or both, in the State	and 607.1508, Florida Statu	ites, the al	pove-named	corporation submits this statement	for the purpose of	changing i	ts registered	
agent. I am	n familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Stat	utes.	poration's board of directors. I here	by accept the app	ommen as	registered	
SIGNATURE _	Will a Home					7-24	-98		
Signature, typed or profind trainer as egistered agent and tide if applicable. (NOTE Registered					required when reinstating)	DATE			
12.	OTFICERS AND		13.		ADDITIONS/CHANGES 1				
TITLE	DPST MARGONIA M	☐ DELETE	1.1 Til	TLF	DPST JEFFCCAT, MARSH 1532 DRIAWARE JACKSONVILLE, FL	61	<b>Change</b>	Addition	
NAME	JEFFCOAT, MARSHALL W		1.2 NA	AME	JEFFCOAT , MAKSH	ALC W.			
STREET ADDRESS	2204 TURNBRIDGE CT		1.3 \$T	REET ADDRESS	1532 DRLAWARE	rve.		Į.	
CITY-ST-ZIP	TALLAHASSEE FL 32311		1.4 CI	TY-ST-ZIP	JACKSON VILLE, FL	32210			
TITLE		☐ DELETE	2.1 11	ILE	}		Change	Addition	
NAME			2.2 NA	ME					
STREET ADDRESS			2.3 ST	REET ADDRESS	•	* 'E			
CITY-ST-ZIP			2.40	ITY - ST - ZIP					
TITLE		☐ DELETE	3.1 TII	ILE			∐ Change	☐ Addition	
NAME			3.2 NA	<b>AME</b>	}				
STREET ADDRESS			3.3 ST	REET ADDRESS					
CITY-ST-ZIP			3.4. 0	ITY-ST-ZIP					
TITLE		☐ DELETE	4.1 10	ILE			☐ Change	Addition	
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 51	REET ADDRESS					
CITY-ST-ZIP			4.4 CF	TY-ST-ZIP	<u> </u>			_	
TITLE		DELETE	5 1 TIT	īLE			Change	☐ Addition	
NAME			5.2 NA	ME					
STREET ADORESS			5.3 ST	REET AODRESS					
CITY-ST-ZIP				TY-ST-ZIP					
TITLE		DELETE	6.1 TIT			,_,,	Change	Addition	
NAME			6.2 NA	ME					
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP				TY-ST-ZIP					
VILL VI LII	·		0.4 61	11 01 611	L				

14. Thereby 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.