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55 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P94000050082 (4)**

1. Corporation Name

J V W ENTERPRISES INCORPORATED

PD
V#1138
5-8-95

Principal Place of Business

3480 SOUTH DIXIE HWY.
STUART FL 34997

Mailing Address

3480 SOUTH DIXIE HWY.
STUART FL 34997

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/05/1994** 3a. Date of Last Report

4. FEI Number **65-0510044** 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 or intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 **310 S. DIXIE HIGHWAY**

2a. Mailing Address

26 **310 S DIXIE HIGHWAY**

Suite, Apt. #, etc.

22 **1A**

Suite, Apt. #, etc.

27 **1A**

City & State

23 **STUART FLORIDA**

City & State

28 **STUART FLORIDA**

Zip

24 **34994**

Country

25 **MARTIN**

Zip

29 **34994**

Country

30 **MARTIN**

9. Name and Address of Current Registered Agent

JANSSEN, MICHAEL A
3480 SOUTH DIXIE HWY.
STUART FL 34997

10. Name and Address of New Registered Agent

81 Name **MICHAEL A JANSSEN**
82 Street Address (P.O. Box Number is Not Acceptable) **310 S DIXIE HWY**
83 **SUITE 1A**
84 City **STUART** FL 85 Zip Code **34994**

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 regulations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

PRESIDENT

3/29/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	JANSSEN, MICHAEL A
STREET ADDRESS	225 WINNACHEE DRIVE
CITY, ST, ZIP	STUART FL
TITLE	D
NAME	WERDA, DANIEL J
STREET ADDRESS	P.O. BOX 1792
CITY, ST, ZIP	STUART FL 34995
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PRESIDENT	☒ Change ☐ Addition
2. NAME	MICHAEL A JANSSEN	
3. STREET ADDRESS	310 S DIXIE HWY	
4. CITY, ST, ZIP	STUART, FLORIDA 34994	
5. TITLE	V-PRESIDENT	☒ Change ☐ Addition
6. NAME	DANIEL J WERDA	
7. STREET ADDRESS	1012 EIGHTH CT	
8. CITY, ST, ZIP		
9. TITLE	SECRETARY / TREASURER	☐ Change ☒ Addition
10. NAME	WADE J. VICKERS	
11. STREET ADDRESS	710 N BUTTERNUT WOOD CIRCLE	
12. CITY, ST, ZIP	PORT ST LUCIE FLORIDA	
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

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 110.07(3)(b), Florida Statutes. Further, I 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 of this report, or on an attachment with an address.

SIGNATURE:

[Signature] **PRESIDENT MICHAEL A JANSSEN**

3/29/95 (467)288-1159

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR