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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000055544

THE GREGORY J. JORGENSEN CORPORATION

Principal Place of business imaining Address						
430 N JEFFERS	430 N JEFFERSON AVE-					
SARASOTA FL 34237 SARASOTA FL 34237					DO NOT WRITE IN THIS SPACE	=
US						
					3. Date Incorporated or Qualifed 07/25/1994	
		10.4435.411			4. FEI Number	Applied For
	ace of Business	2a. Mailing Address	7	-	1	Applied For
	Ringwood Meadow					Not Applicable
Suite, Apt. 3	#, etc. Drive	Suite, Apt. #, etc.	I	Orive	f P Cardifactor of Status Desired T T T	75 Additional ee Required
City & State City & State					6. Election Campaign Financing 55	.00 May Be
23 Sarasota, FL 28 Sarasota, FL		rt.			ded to Fees	
20			Country		8. This corporation owes the current year Intangible	
`	-772825 USA	29 34235-772 8 0) ri	SA	Personal Property Tax.	i □No
24 34233	9. Name and Address of Current		<u> </u>	<u> </u>	10. Name and Address of New Registered Agent	
81				Name		
FELDMAN, MARC H						
3908 26TH ST W			82	Street A	ddress (P.O. Box Number is Not Acceptable)	
BRADENTON FL 34205			83			
			84	City	FI 85	Zip Code
44 5	to the avaidable of Continue CO7 DEOC	and 607 1509 Elorida Statutos I	the above	named c	• • 1	ng its registered
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 ar	m familiar with, and accept the obligati	ons 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 ANI	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	PS	☐ DELETE	1.1 TMLE		PS 📉 Cha	ange 🗌 Addition
NAME	JORGENSEN, GREGORY J		1.2 NAME		JORGENSEN, GREGORY J.	
STREET ADDRESS	430 N JEFFERSON AVE			ADDRESS	4747 RINGWOOD MEADOW DRIV	/E
CITY-ST-ZIP	SARASOTA FL 34237		1.4 CITY-S	T-71P	SARASOTA, FL 34235-7728	
TITLE			2.1 TITLE		☐ Cha	ange
NAME		_	2.2 NAME			į
1			2.3 STREE	ADDRESS		ĺ
STREET ADDRESS						j
CITY-ST-ZIP		☐ DELETE	2.4 CITY-5 3.1 TITLE	11-219	☐ Chi	ange Addition
TITLE		El Dettere		1		
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1		}
CITY-ST-ZIP		☐ DELETE	3.4. CITY-5 4.1 TITLE	IT-ZIP	□ Ch:	ange 🗍 Addition
TITLE			4.1 IIILE 4. 2 NAME			singe
NAME			4.2 NAME	r apposee		
STREET ADDRESS				ľ		
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S 5.1 TITLE	1-ZIP	∏ Ch	ange Addition
TITLE			5.1 (TILE 5.2 NAME			
NAME			5.3 STREE	TADDRESS		
STREET ADDRESS			5.4 CITY-S			
CITY-ST-ZIP		□ DELETE	6.1 TITLE	1-ZIP	☐ Ch:	ange
TITLE		☐ DELETE				
NAME			6.2 NAME			
STREET ADDRESS	1		6.3 STREE	ADDRESS		

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 suppliemental 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes of the analysis and address, with all other like empowered.

ER OR DIRECTOR

SIGNATURE: 6

1/13/99

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