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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400069028 (6)  JAR OF MARCO, INC.  Principal Place of Business  Mailing Address							
1001 NORTH BARFIELD DR MARCO ISLAND FL 33937		1001 NORTH BARFIELD DR MARCO ISLAND FL 34145-2354					
					3. Date Incorporated or Qualified 09/19/1994	3a. Date of La 02/05/199	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	·-		65-0530795		Not Applicable
Suite, Apt #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	1 1 7	75 Additional e Required	
City & Sta	te	City & State			6. Election Campaign Financing		.00 May Be
23		28			Trust Fund Contribution		ded to Fees
Ζ·ρ <b>24</b>	Country 25	Z(p 29			8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes		
	9. Name and Address of Curre				10. Name and Address of New Re	gistered Agent	
TUCKER, GLENN E 204 SUN BANK CENTER 950 NORTH COLLIER BLVD. MARCO ISLAND FL 33937  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorized agent. Lam lamiliar with, and accept the obligations of, Section 607.0505. Florida Statutes.				i3   i4   City	iress (P.O. Box Number is Not Acceptab	FL 85	Zip Code
office or agent. I a SIGNATURE	registered agent, or both, in the Statem lamiliar with, and accept the obli-				ation's board of directors. I hereby acceptions are a size of the	ot the appointmen	nt as registered
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TIFLE	P	☐ DELETE	1.1 T(T)			Cha	nge 🔲 Addition
NAME	SAITTA, JULIANA		1.2 NAN	-			
STREET ADDRESS CITY-ST-702	500 E JOY CIRCLE MARCO ISLAND FL 33937			-ST-ZIP			į.
II,II	VP DELETE		2.1 TITL			Cha	nge
NAME	SAITTA, RICHARD		2.2 NAN	Ε			
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CITY-\$1 Zif	MARCO ISLAND FL 33937		2. 4 CIT	(-ST-ZIP			
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NAME			3.2 NAM	_			
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STREET ADDRESS				ET ADDRESS			
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11:16		DELETE	5.1 TITL			Cha	nge 🔲 Addition
NAME			5.2 NAN	ie ]			
STREET ADDRESS			5.3 STR	ET ADDRESS			ļ
CHY-S1-ZIF	·		5.4 City	-ST-ZiP			
TILF		DELETE	61 TITL	j		Cha	inge 🔲 Addition
NAME			62 NAM				
STREET ADDRESS			6.3 \$TR	EY ADORESS			

6.4 CITY-ST-ZIP

**SIGNATURE:** 

**FILED** 

Apr 28 1997 8:00am

Secretary of State

14. I do 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 man attachment with an address