FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000073106 (4) 1. Corporation Name JAN HOLDING COMPANY, INC.

Mailing Address Principal Place of Business SIL YOUTH CAMP RO 511 YOUTH CAMP RD



GROVELAND FL		GROVELAND FL	GROVELAND FL 34736					
						G. Extre mas pe che e	ite of Last Report 05/01/1995	
2. Principal Place of Business		2a. Mailing Address 26				4. FEI Number 59-3281549	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, (Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		Oity & State	Orty & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Z ₁ p 24	Country 25	Ζφ 29	[30]	Country 30		8. This corporation has liability for intangible Florida Statutes Yes No	tax under s 199.032.	
9. Name and Address of Current Registered Agent				T	10. Name and Address of New Registered Agent			
				81	Name			
JANNEY,				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
511 YOUTH CAMP RD GROVELAND FL 34736				83				
				84	City	F	L 85 Zip Code	
or registered	the provisions of Sections 607. d agent, or both, in the State of and accept the obligations of,	Hor da i Such change was a	aumonzea by m	pove u	amed corpora oration's board	ation submits this statement for the purpose of o d of directors. I hereby accept the appointment	changing its registered office as registered agent. I am	

SIGNATURE _	lignature, typed or printed name of registered agent and the trapportable. (NO	IE: Biogisteren Agenit signatura regioned	when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PS DELETE	1 1 TITLE	☐ Change ☐ Addition
NAME	JANNEY, A.C.	1.2 NAME	
STREET ADDRESS	511 YOUTH CAMP RD	1.3 STREET ADDRESS	
CITY-ST-ZIF	GROVELAND FL 34736	1.4 CITY - \$1 - 2IP	
TITLE	☐ DELFIE	2 1 TILE	Change Addition
NAME		22 NAME	
STREET ADDRESS		2.3 STREE! ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TrTLE	DELETE	3 1 THLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREFT ADDRESS	
CITY - ST - ZIP		3.4 CI*Y - S* - 7IP	
TITLE	DELETE	4 1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CiTY - ST - ZiP	
TITLE	DELETE	5 1 TIPLE	Change Addition
NAME		5 2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CiTY-ST-ZiP		5.4 CHY-ST-ZIP	
TITLE	DELETE	6 1 TiTu.f	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6 4 CITY - ST - ZIP	

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 carry; 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.

4-5-96 352.7874825

CR2E034 (12/95)