

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

FILED

**Apr 23 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000077054 (2)

1. Corporation Name
GOLDEN JERSEY PRODUCTS, INC.



Principal Place of Business 5070 N A1A SUITE#221 VERO BEACH FL 32963 US	Mailing Address 5070 N A1A SUITE#221 VERO BEACH FL 32963 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 780 US 1 22 301 City & State 23 VERO BEACH FLA Zip Country 24 32962 US	2a. Mailing Address 26 780 US 1 27 301 City & State 28 VERO BEACH FLA Zip Country 29 32962 US	3. Date Incorporated or Qualified 10/20/1994	4. FEI Number 65-0537568 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**DIBRUNO, JOSEPH A
5070 NORTH A1A, SUITE#221
VERO BEACH FL 32963**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
780 US 1 # 301
83 ~~VERO BEACH FL~~
84 City **VERO BEACH** FL 85 Zip Code **32962**

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature typed in printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DIBRUNO, JOSEPH A	
STREET ADDRESS	5070 NORTH A1A, SUITE 221	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	SAGE, MATTHEW H	
STREET ADDRESS	5070 NORTH A1A, SUITE#221	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	DESHON, GARY D	
STREET ADDRESS	5070 NAJA #221	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	780 US 1 SUITE 301
1.4 CITY-ST-ZIP	VERO BEACH FLA 32962
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	780 US 1 SUITE 301
2.4 CITY-ST-ZIP	VERO BEACH FLA 32962
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	780 US 1 SUITE 301
3.4 CITY-ST-ZIP	VERO BEACH FLA 32962
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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

SIGNATURE:  **GARY D. DESHON** 4-17-98 561-569-1755

CPRE034 (10/97)