

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000078316 (4)

1. Corporate Name

JACKSONVILLE TILE AND REMODEL, INC.

APPROVED
AND
FILED

25 MAY - 1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1545 LEE ROAD
SWITZERLAND FL 32259

Mailing Address

1545 LEE ROAD
SWITZERLAND FL 32259

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. # etc.

22 City & State

23 County

24

28. Mailing Address

26 Suite, Apt. # etc.

27 City & State

28 County

29

30

3a. Date Incorporated or Qualified
10/24/1994

3b. Date of Last Report
Not Applicable

4. FEI Number
59-3295082

5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contributions
 \$5.00 May Be Added to Fees

7. The corporation has authority to do business in Florida under G.L. 500.005
Florida Statutes
 Yes No

B. Name and Address of Current Registered Agent

WIGGINS, BRUCE W
1545 LEE ROAD
SWITZERLAND FL 32259

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections G.L. 500 and G.L. 500B, Florida Statutes, the above-named corporation submits the 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 provisions of Article 617, Part 1, Florida Statutes.

SIGNATURE

(Handwritten signature of Bruce W. Wiggins)

(Handwritten signature of Bruce W. Wiggins)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS, DIRECTORS, AND EMPLOYEES

NAME	President	32259	13.1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bruce W. Wiggins	FL	13.2	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1545 Lee Rd. Switzerland		13.3	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP			13.4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.5	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.6	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			13.7	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP			13.8	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.9	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.10	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			13.11	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP			13.12	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.13	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			13.14	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			13.15	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY, ST, ZIP			13.16	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 151(1)(C)(iii), Florida Statutes. I further certify that the information indicated on the annual report or full financial 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 person or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of paragraph 10 or 11 of attachment with my initials.

SIGNATURE:

(Handwritten signature of Bruce W. Wiggins)

SIGNATURE AND TITLE OF ANNUAL OFFICER OR DIRECTOR

DEPOSITED BY MAY 1

BRUCE W. WIGGINS 4/28/95 904287

7511