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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

## P94000078411 (3) **DOCUMENT #**

1. Corporation Name NATURE COAST JEWELRY DISPLAY, INC.  Principal Place of Business Mailing Address  10120 BRIAR CIRCLE HUDSON FL 34687 HUDSON FL 34687						
US US	. 3400/	US 14667		Date Incorporated or Qualified	3a. Date o	Last Report
				10/24/1994	05/	01/1995
·	ace of Business	2a. Mailing Address		4. FEI Number	<del>-</del>	Applied For
Suite, Apt.	# oto	Suite, Apt. #, etc.		65-0534456	/	Not Applicable \$8.75 Additional
22)	#, <del>C</del> IC.	27		5. Certificate of Status Desired	Ū∕	Fee Required
City & State	e	City & State		6. Election Campaign Financing		<b>\$5.00</b> May Be
23		28	T - 0	Trust Fund Contribution		Added to Fees
Zip <b>24</b>	Country 25	Zip <b>29</b>	Country 30	8. This corporation has liability for Florida Statutes		unders 199.032,
24	9. Name and Address of Curr		1301	10. Name and Address of New F		jent
11. Pursuant or register familiar wi	to the provisions of Sections 607.05 red agent, or both, in the State of Flith, and accept the obligations of, Si	orida. Such change was authori ection 607.0505, Florida Statute	zed by the corporation's books.	dSon oration submits this statement for the pu and of directors. I hereby accept the app	FL rpose of chan- cintment as re	85 Zip Code 34661 ging its registered office gistered agent. Lam
	Signature, typed or printed name of registered a	good and the chapping to the CTORS	OTE Regulated Agent's graffing began	ADDITIONS/CHANGES TO OFF	DAT:	VIRECTORS IN 12
12.	PSO	DELETE		PSD		Change
NAME	BOETTCHER, DENISE		12 NAME	DOETTCHER Denise	2	
STREET ADDRESS	2154-A MARINER BLVD		1.3 STREET ADDIFESS	BOETTCHER, Denise 0120 BriAR Circle Ludson FL 341	2_	
CITY-ST-ZIP	SPRING HILL FL 34609	El Divisio		ludson FL 341	061_	Change Addition
TITLE		DELETE	2 1 Title 22 NAME			Charge   Hodelich
NAME STREET ADDRESS			2.3 STREET ADDRESS			
CITY - ST - ZIP			24 CHY ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELÉ IE	3 4 CITY ST-ZIP 4 1 TULE			Change Addition
NAME		<u></u>	4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-S1-ZIP			4 4 CHY   \$1 - ZIP			
TITLE		☐ DELETE	5 1 Till E			Change
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S! - 7IP 6.1 TITLE			Change Addition
NAME		<u></u>	6.2 NAME		-	_
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST. 7IP	1		6.4 C(Ty - ST - Z)P			

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 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 oath; that I am an officer or director of the corporation or the receiver or Irustee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.