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PROFIT CORPORATION ANNUAL REPORT



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

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DOCUMENT #

P95000002067 (3)

JERRY'S DRAFTING & DESIGN, INC. Mailing Address Principal Place of Business 5730 BARNA AVENUE 5730 BARNA AVIENUE TITUSVILLE FL 32780 TITUSVILLE FL 32780 3. Date Incorporated or Qualified 3a. Date of Last Report NA 01/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 59-3288161 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #. etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 8. This corporation has liability for intangible tax under s 199.032, Zφ Country Zip Country Florida Statutes Yes No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) LEBEAU, GERALD P 62 **5730 BARNA AVENUE** 83 TITUSVILLE FL 32780 Zip Code 84 City 85 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 Signa ure, typed or printed name of registered agent and title 1 approable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIFIECTORS 13. 12. Addition ☐ DELETE 1.1 TITLE TITLE LEBEAU, GERALD P 1.2 NAME NAME **5730 BARNA AVENUE** 1.3 STREET ADDRESS STREET ADDRESS **TITUSVILLE FL 32780** 1.4 CITY-ST-ZIP CHIY-ST-ZIP Change ☐ Addition DELETE 2. 1 TITLE TIFLE 2.2 NAME NAM: 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZP ☐ Change ■ Addition DELE1E 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STHEFT ADDRESS CITY - \$1 - ZIP 3 4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THEF 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CHTY-ST-ZIP Addition DELETE ☐ Change 5 1 TITLE TIFLE 5 2 NAME NAME 5.3 STREET ADDRESS STHEET ADDRESS 5.4 CITY - ST - ZIP C-TY-ST-ZiP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name GERALD P. LEBEAU 4/22/96 407-268-1445

CITY-ST-ZIP

CR2E034 (12/95)