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Jan 26 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 # **P95000003422 (9)**

1. Corporation Name

LAW OFFICES OF J. JEFFERSON OVERBY, P.A.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/11/1995

4. FEI Number

65-0585276

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

21. **309 WHITEHEAD**

Suite, Apt. #, etc.

2a. Mailing Address

Suite, Apt. #, etc.

23. **KEY WEST FL**

City & State

27. **KEY WEST FL**

City & State

24. **33040**

Zip

25. **USA**

Country

29. **33041**

Zip

30. **USA**

Country

9. Name and Address of Current Registered Agent

OVERBY, J J
309 WHITEHEAD STREET
SUITE 205
KEY WEST FL 33040

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

309 WHITEHEAD ST.

83. **KEY WEST FL**

84. City

FL 85. Zip Code
33040

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

J. Jefferson Overby
Signature, typed or printed name of registered agent and title, if applicable

J. JEFFERSON OVERBY
(NOTE: Registered Agent signature required when reinstating)

1-13-98
DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **OVERBY, J J**

STREET ADDRESS **309 WHITEHEAD STREET**

CITY-ST-ZIP **KEY WEST FL 33040**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

309 WHITEHEAD ST

1.4 CITY-ST-ZIP

KEY WEST FL

33040

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

J. Jefferson Overby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. JEFFERSON OVERBY

Date

Daytime Phone #

0166386

CR2E034 (10/97)