## HILE NOW FILING HEE AFTER MAY 1ST IS \$550.00

## May 07, 2001 8:00 am Secretary of State 05-07-2001 90064 029 \*\*\*150.00

CORPORATION ANNIAL REPORT



FLORIDA DEPARTMENT DE STATE

Katherine Harris

Secretary of State Secretary of State

C	1001 · · ·	ADIVISION	OF CORPORAT	TIONS .	<del></del>	e e se como de como			N. 16 S. Filmbert	Service.
DOCU	MENT # P95000	012614								
J. Corporate	L & RANDALL, INC.			, <b>V</b>		A00625	9			
I PARTIE					}		(	<b>6</b> 11 <b>6 1</b> 1 1 1		
Principal Plac	e of Business	Mailing Address	表表:			1 taattaat (to 161a) bij	e Paris en de	est deter in		
1175 KINGS RE JACKSONVILLE		1175 KINGS RD JACKSONVILLE FL 322	<b>0</b> 9		} '					
		protocitizes it ver			<u> </u>	DO N	OT WRITE	IN THIS S	SPACE	
					1	Incorporated or 0 13/1995	Qualifed			3.5
	Place of Business	2a. Mailing Address	····		,	Number			: A	pplie
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-3	<u> 3365379</u>	<u>.                                    </u>			iot Ar
22 Suite, Apr.	. #, etc.	Suite, Apr. #, etc.			5. Cert	ifcate of Status De	esired [	]	\$8.75 Fee F	
City & Sta	te	City & State			6. Elec	tion Campaign Fir	ancing <sub>[</sub>		\$5.00	) Ma
23		28			<del></del>	t Fund Contribution	n T		Added	I tộ F∈
Zip Country Zip 25 29			Country 30	У	1	corporation owes onal Property Tax		-	ngible ∐Yes	<b>12</b> 1
241	9. Name and Address of Current	<del></del>	[30]			ne and Address o			_	1201
			81	Name					<u> </u>	
	DALL, SHERMAN L		82	Street	Address (P.O. F	ox Number is Not	Acceptable			<del></del>
3	S KINLOCK DR W		02	Julean	Accress (1.0. 2	ox realiser is real		· ,		
JAU	KSONVILLE FL 32219		83	1					•	
1			. 84	City	<del></del>			FL	85 Zip	Code
	· ·	· ·		1				LI.	1 1	
11: Pursuant	to the provisions of Sections 607 0502	and 607 1508, Florida St	atutes the abov	e-named	comoration sub	nits this statemen	for the nu		hanning it	s reni:
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State or	f Florida. Such change wa	as authorized by	the corpo	corporation sub- pration's board of	mits this statemen f directors. I here	t for the pur by accept th	pose of c	hanging it ment as n	s regi: egiste
office or r agent. I a	to the provisions of Sections 607.0502 registered agent, or both, in the State or am familiar with, and accept the obligation	f Florida. Such change wa	as authorized by	the corpo	corporation sub oration's board o	mits this statemen f directors. I here	t for the pur by accept the	pose of c	hanging it ment as r	s regir egiste
office or r agent. I a SIGNATURE	registered agent, or both, in the State or im familiar with, and accept the obligation Signature, typed or printed name of registered agent.	f Florida. Such change wa ons of, Section 607.0505, and title if applicable. (N	as authorized by	the corpo	oration's board o	f directors. I here	t for the pur by accept the	pose of c	hanging it ment as n	s regir egiste
office or r agent. I a SIGNATURE	registered agent, or both, in the State or im familiar with, and accept the obligation Signature, typed or printed name of registered agent OFFICERS AND	f Florida. Such change wa ons of, Section 607.0505, and little if applicable. (N	as authorized by Florida Statutes NOTE: Registered Age	the corpo	oration's board o	f directors. I here	oy accepf th	rpose of c ne appoint	ment as r	ors I
office or r agent. I a SIGNATURE 12.	registered agent, or both, in the State or am familiar with, and accept the obligation of the state of the st	f Florida. Such change wa ons of, Section 607.0505, and title if applicable. (N	AS authorized by Florida Statutes NOTE: Registered Age 13.	the corpo	oration's board o	f directors. I here	oy accepf th	rpose of c ne appoint	ment as n	ors I
office or r agent. I a SIGNATURE 112.	registered agent, or both, in the State or am familiar with, and accept the obligation of the state of the st	f Florida. Such change wa ons of, Section 607.0505, and little if applicable. (N	AS authorized by Florida Statutes NOTE: Registered Age 13. 1.1 TITLE. 1.2 NAME	the corpo	oration's board o	f directors. I here	oy accepf th	rpose of c ne appoint	ment as r	ors I
office or ragent, I a SIGNATURE  12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State or am familiar with, and accept the obligation of registered agent.  OFFICERS AND SHERMAN, RANDALL L  6508 KINLOCK DR W	f Florida. Such change wa ons of, Section 607.0505, and little if applicable. (N	as authorized by Florida Statutes  NOTE: Registered Age  13.  1.1 TITLE.  1.2 NAME  1.3 STREE	the corpo	oration's board o	f directors. I here	oy accepf th	rpose of c ne appoint	ment as r	ors I
office or r agent. I a SIGNATURE 112.	registered agent, or both, in the State or am familiar with, and accept the obligation of the state of the st	f Florida. Such change wa ons of, Section 607.0505, and little if applicable. (N	as authorized by Florida Statutes  NOTE: Registered Age  13.  1.1 TITLE.  1.2 NAME  1.3 STREE  1.4 CITY-S	the corpo	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	ment as r	ORS I
office or ragent, I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFINE AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G	f Florida. Such change water ons of, Section 607.0505, and title if applicable. (NO DIRECTORS	as authorized by Florida Statutes  VOTE: Registered Age  13.  1.1 TITLE.  1.2 NAME  1.3 STREE  1.4 CITY-S	the corpo	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	DIRECT	ORS I
office or ragent, I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change water ons of, Section 607.0505, and title if applicable. (NO DIRECTORS	as authorized by Florida Statutes  13.  1.1 TITLE. 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	the corpo	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	DIRECT	ORS I
office or ragent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFINE AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G	f Florida. Such change water ons of Section 607.0505, and title if applicable. (NOTECTORS DELETE	as authorized by Florida Statutes  13.  1.1 TITLE.  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-S  2.1 TITLE  2.1 STREE  2.4 CITY-S	the corpo s. nt signsture of TADORESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT	ORS I
office or ragent, I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change water ons of, Section 607.0505, and title if applicable. (NO DIRECTORS	as authorized by Florida Statutes T3.  1.1 TITLE. 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.1 TITLE	the corpo s. nt signsture of TADORESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	DIRECT	ORS I
office or ragent, I a SIGNATURE  12.  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  NAME	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change water ons of Section 607.0505, and title if applicable. (NOTECTORS DELETE	as authorized by Florida Statutes  13.  1.1 TITLE  1.2 NAME  1.3 STREE  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-S  3.1 TITLE  3.2 NAME	the corposes.  It adoress	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT	ORS I
office or ragent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST-ZIP  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change water ons of Section 607.0505, and title if applicable. (NOTECTORS DELETE	### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. #### 13. ##### 13. ##### 13. ##### 13. ##########	the corposes.  If ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT	ORS I
office or ragent, I a SIGNATURE  12.  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  NAME	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change water ons of Section 607.0505, and title if applicable. (NOTECTORS DELETE	as authorized by Florida Statutes  13.  1.1 TITLE. 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 3.4 CITY-S	the corposes.  If ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT	ORS I
office or ragent. I a SIGNATURE  12.  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  TITLE  NAME  STREET ADORESS  CITY- ST-ZIP  STREET ADORESS  CITY- ST-ZIP	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change was ons of, Section 607.0505, and title if applicable. (ADDIRECTORS DELETE DELETE	as authorized by Florida Statutes  13.  1.1 TITLE. 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 3.4 CITY-S	the corposes.  If ADDRESS ST. ZIP  If ADDRESS ST. ZIP  If ADDRESS ST. ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT: Change	ORS I
office or ragent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change was ons of, Section 607.0505, and title if applicable. (ADDIRECTORS DELETE DELETE	as authorized by Florida Statutes  13.  1.1 TITLE. 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	the corposes.  If ADDRESS ST. ZIP  If ADDRESS ST. ZIP  If ADDRESS ST. ZIP	oration's board o	f directors. I here	oy accepf th	pose of c ne appoint DATE ERS AND	D DIRECT: Change	ORS I
Office of ragent, I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	Florida. Such change water ons of, Section 607.0505,   and little if applicable. (No.   DIRECTORS   DELETE   DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.NAME 1.3 STREE 2.1 TITLE 22.NAME 23.STREE 2.4 CITY-S 31.TITLE 32.NAME 33.STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	the corposes.  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I
Office of ragent, I a signature  12. Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change was ons of, Section 607.0505, and title if applicable. (ADDIRECTORS DELETE DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.NAME 1.3 STREE 1.4 CITY-S 2.1 TILE 22.NAME 23.STREE 34. CITY-S 4.1 TILE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TILE 4.2 NAME 5.1 TILE 4.2 NAME 4.3 STREE 4.1 TILE 4.2 NAME 5.1 TILE 4.2 NAME 5.1 TILE 5.1 TIL	the corposes.  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	D DIRECT: Change	ORS I
Office of ragent, I a signature  12. Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	Florida. Such change water ons of, Section 607.0505,   and little if applicable. (No.   DIRECTORS   DELETE   DELETE	as authorized by Florida Statutes  13.  11 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22 NAME 23 STREE 3.1 TITLE 32 NAME 3.3 STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 NAME	T ADDRESS ST-ZIP T ADDRESS	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I
Office of ragent, I a gent, I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	Florida. Such change water ons of, Section 607.0505,   and little if applicable. (No.   DIRECTORS   DELETE   DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.1 AME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22.1 AME 23. STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE	TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I
Office of ragent, I a signature  12. Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	Florida. Such change water ons of, Section 607.0505,   and little if applicable. (No.   DIRECTORS   DELETE   DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22.NAME 23.STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.5 STREE 5.5 CITY-S	TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I
Office of ragent, I a signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change was ons of, Section 607.0505, and little if applicable. (A)  DIRECTORS  □ DELETE  □ DELETE  □ DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22.NAME 23.STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.5 STREE 5.5 CITY-S	TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I
Office of ragent, I a signature  12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State or im familiar with, and accept the obligation of Fricers and OFFICERS AND DEFICERS AND SHERMAN, RANDALL L 6508 KINLOCK DR W JACKSONVILLE FL 32219 D RANDALL, DORIS G 6508 KINLOCK DR W	f Florida. Such change was ons of, Section 607.0505, and little if applicable. (A)  DIRECTORS  □ DELETE  □ DELETE  □ DELETE	as authorized by Florida Statutes  13.  11.1 ITILE. 12.1 AME 1.3 STREE 1.4 CITY-S 2.1 TITLE 22.1 AME 23. STREE 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.1 TITLE 6.2 NAME 6.3 STREE 6.2 NAME 6.3 NAME 6.3 NAME 6.3 NAME 6.4 CITY-S 6.4 TITLE 6.5 NAME 6.5 NAME 6.6 NAME 6.6 NAME	TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS	oration's board o	f directors. I here	oy accepf th	rpage of c re appoint DATE ERS AND	DIRECTI Change Change	ORS I

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 an an attachment with an artist is with all other little empowered.