


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 950000 16422 (4) 1. Corporation Name J-CO Enterprises, Inc. of North Florida					
Principal Place of Business 4027 N.W. 59th Ave Gainesville, FL 32653			Mailing Address 4027 N.W. 59th Ave Gainesville, FL 32653		
2. Principal Place of Business 21 4027 N.W. 59 Ave State, Apt. #, etc.		2a. Mailing Address 26 4027 N.W. 59 Ave Suite, Apt. #, etc.		3. Date Incorporated or Qualified 2/20/95	
22 City & State GAINESVILLE		27 City & State GAINESVILLE Florida		3a. Date of Last Report 2-21-96	
23 Zip 32653		28 Zip 32653		4. FEI Number 59-3295689	
24 Country Alachua		29 Country Alachua		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
25 Alachua		30 Alachua		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent Robert E. Wilks 4027 N.W. 59 Ave Gainesville, FL 32653		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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 Robert E. Wilks President DATE 2-24-97 <small>(Type above: signed on behalf of corporation, then agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating)</small>					
12. OFFICERS AND DIRECTORS TITLE President P <input checked="" type="checkbox"/> DELETE NAME Robert E. Wilks STREET ADDRESS 4027 N.W. 59 Ave. CITY-ST-ZIP GAINESVILLE, FL 32653 TITLE Secretary S <input type="checkbox"/> DELETE NAME Susan K. Wilks STREET ADDRESS 4027 N.W. 59 Ave CITY-ST-ZIP GAINESVILLE, FL 32653 TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12 NAME Robert E. Wilks 13 STREET ADDRESS 4027 N.W. 59 Ave 14 CITY-ST-ZIP GAINESVILLE, FL 32653 21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: Susan Wilks DATE 2/24/97 352 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> 376-4868 <small>Daytime Phone</small>					

CR2E034 (9/96)