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FILED
Apr 20 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 # P95000019211 (8)

1. Corporation Name
J H S C CORPORATION

Principal Place of Business

C/O 501 E. KENNEDY BLVD
SUITE 170
TAMPA FL 33602
US

Mailing Address

C/O 501 E. KENNEDY BLVD
SUITE 1700
TAMPA FL 33602
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/09/1995

4. FEI Number

65-0641559

Applied For

Not Applicable

6. 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

2. Principal Place of Business

21 13141 McGregory Blvd

Suite, Apt. #, etc.

22 Suite 2

City & State

23 Fort Myers, FL

Zip

24 33919

Country

25 Ler

2a. Mailing Address

26 13141 McGregory Blvd

Suite, Apt. #, etc.

27 Suite 2

City & State

28 Fort Myers, FL

Zip

29 33919

Country

30 Lee

9. Name and Address of Current Registered Agent

RICHARD A. JACOBSON
501 E. KENNEDY BLVD., #1700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

John C. Buskirk

82

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

6970 Pickadilly Ct

83

84

City Ft Myers

FL

85 Zip Code

33719

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 John C. Buskirk

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/14/98

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE

NAME SCHWEIZER, JURG M.
STREET ADDRESS 557 LAKE MUREX CIRCLE
CITY - ST - ZIP SANIBEL FL

TITLE AS ☐ DELETE

NAME RICHARD A. JACOBSON
STREET ADDRESS 501 E. KENNEDY BOULEVARD, #1700
CITY - ST - ZIP TAMPA FL

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

1.4 CITY - ST - ZIP

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; 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 in an attachment with an address.

SIGNATURE:

SWISZER

SWISZER

12.44.98

CR2E034 (10/97)