

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000020337 (8).

1. Corporation Name

J & H WATERSTOP, INC.



Principal Place of Business

1082 E. GRAVES AVE.
ORANGE CITY FL 32763

Mailing Address

1082 E. GRAVES AVE.
ORANGE CITY FL 32763

2. Principal Place of Business

21 962 Shadick Dr.
Suite, Apt. #, etc. Bay 3

22 City & State

23 Orange City

24 Zip 32774

25 Country USA

2a. Mailing Address

26 P.O. Box 1103
Suite, Apt. #, etc.

27 City & State

28 Orange City

29 Zip 32774-1103

30 Country USA

3. Date Incorporated or Qualified

03/10/1995

3a. Date of Last Report

4. FEI Number

59-3302615

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JORGENSEN, SCOTT
1082 E. GRAVES AVE.
ORANGE CITY FL 32763

10. Name and Address of New Registered Agent

1. Name

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

3. City

4. State

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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

Scott A. Jorgensen

January 16, 1996

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME JORGENSEN, SCOTT
STREET ADDRESS 1082 E. GRAVES AVE.
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE ☐ DELETE

NAME HART, TIMOTHY
STREET ADDRESS 1410 DRYSDALE DR.
CITY-ST-ZIP DELTONA BEACH FL 32725

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. Name

2. Street Address

3. City

4. State

5. Zip

6. Title

7. Street Address

8. City

9. State

10. Zip

11. Title

12. Street Address

13. City

14. State

15. Zip

16. Title

17. Street Address

18. City

19. State

20. Zip

21. Title

22. Street Address

23. City

24. State

25. Zip

26. Title

27. Street Address

28. City

29. State

30. Zip

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is not qualified 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Scott A. Jorgensen
Signature and Typed or Printed Name of Signing Officer or Director

January 16, 1996 904-774-4913
Date Daytime Phone

CR2E034 (12/95)