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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000021513

1. Corporation Name

D & J FRAMING, INC.

## Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90020 010 \*\*\*150.00



	•					
Principal Place of Business Mailing Address						T SABUSABL HE (DIEK DYH) BENY BENY BENY BENY BENY DIEBY DILEN HERRE HIN KODN
9787 MACARTH		9787 MACARTHUR COURT				
JACKSONVILLE		JACKSONVILLE FL 32216				
					DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed
		1				03/16/1995
2. Principal Pi	lace of Business	<u>-</u>	2a. Mailing Address			4. FEI Number Applied For
21		26	Suite. Apt. #. etc.			59-3302318   Not Applicable   \$8.75 Additional
Suite, Apt.	#, etc.		¬			5. Certificate of Status Desired Fee Required
22		City & State	City & State			
City & State	9	<del> </del>				6. Election Campaign Financing Trust Fund Contribution  S5.00 May Be Added to Fees
23 Zin	Country	28	Zip Country			8.—This corporation owes the current year Intangible
Zip			30			Personal Property Tax.
24	9. Name and Address of Curren		301			10. Name and Address of New Registered Agent
	J. 112110 J. 12110 J			81	Name	
CLARK, DONALD R				D	(D.O. D., Marshavia Net Acceptable)	
9787	MACARTHUR CT.			82	Street Add	idress (P.O. Box Number is Not Acceptable)
JACI	KSONVILLE FL 32216			83		
				Щ		
				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 re 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 registagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE	: Registered	i Agen	t signature requi	uired when reinstating) DATE
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PRD	☐ DELETE	1.1 TI	1.1 TITLE		☐ Change ☐ Addition
NAME	CLARK, DONALD R.	•	1.2 N	AME,		<b>\</b>
STREET ADDRESS	9787 MACARTHUR CT.		1.3 STREE		ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		_	ITY-ST	-ZIP	
TITLE	SD	☐ DELETE	2.1 ∏	TLE	i	☐ Change ☐ Addition
NAME	VERCHER, JOHN B.			AME `		
STREET ADDRESS	11561 TREASURY CIR W.		2.3 S	2.3 STREET ADDRESS		
CITY-ST-ZIP			ITY-S	T- ZIP	Charge (3) Addition	
حججت عالال	<u> </u>	DELETE	- 8		-   -   -   -   -	Change Addition
NAME			3.2 N			
STREET ADDRESS	<b>1</b>		3.3 S	TREET	ADDRESS	
CITY-ST-ZIP			4. CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE		☐ DELETE	4.1 TITLE		}	Challes Addition :
NAME			4. 2 NAME			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CITY-5		r-ZiP	Change Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		]	☐ Change ☐ Addition
NAME					ADDDESS	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				ITY-ST	· ZP	Change Change
TITLE		☐ DELETE	6.1 TI			☐ Change ☐ Addition
NAME			6.2 N			
STREET ADDRESS			6.3 S	IKEET	ADDRESS	

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 with all prefilike empowered.

SIGNATURE:

904/642-4456