

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P95000039041 (5)**

1. Corporation Name
808 INCORPORATED

Principal Place of Business

**4118 PHILLIPS HIGHWAY
JACKSONVILLE FL 32207**

Mailing Address

**4118 PHILLIPS HIGHWAY
JACKSONVILLE FL 32207**

FILED
Jan 29 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/15/1995

4. FEI Number

59-3338402

Applied For

Not Applicable

5. 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

2a. Mailing Address

21 **Lonnie Margol**

26 **11554 Davis Creek Ct**

22 **11554 Davis Creek Ct**

27 **L. Margol**

23 **Jacksonville, FL**

28 **Jacksonville, FL**

24 **32256** **USA**

29 **32256** **USA**

9. Name and Address of Current Registered Agent

**JERRY BLUMBERG
1133 4TH STREET, SUITE 300
SARASOTA FL 34236**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD MARGOL, LONNIE E**
STREET ADDRESS **4118 PHILLIPS HIGHWAY**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE ☐ DELETE

NAME **VD SALISBURY, GARY**
STREET ADDRESS **4118 PHILLIPS HIGHWAY**
CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE ☐ DELETE

NAME **BLUMBERG, JERRY**
STREET ADDRESS **1133 4TH ST., #300**
CITY-ST-ZIP **SARASOTA FL — 34236**

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

☒ Change ☐ Addition

1.1 TITLE **PD**
1.2 NAME **Margol, Lonnie E**
1.3 STREET ADDRESS **11554 Davis Creek Ct**
1.4 CITY-ST-ZIP **Jacksonville, FL 32256**

☒ Change ☐ Addition

2.1 TITLE **VD**
2.2 NAME **Salisbury, Gary**
2.3 STREET ADDRESS **11554 Davis Creek Ct**
2.4 CITY-ST-ZIP **Jacksonville, FL 32256**

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
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)(f), 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:

REQUIRED

1/15/98 941 366-0091

CR2E034 (10/97)