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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000040062 (8)

JERRON DECKING & PAINT, INC.

Principal Place of Business Mailing Address

124 MARGO LANE
LONGWOOD FL 32750

Mailing Address

124 MARGO LANE
LONGWOOD FL 32750-2807

FILED Apr 14 1997 8:00am Secretary of State



3a. Date of Last Report

3. Date Incorporated or Qualified

						05/15/1995	09/	24/1996		
2. Principal Place of Business 28. Mailing Address						4. FEI Number			pplied For	
21		26	26			59-3316232		Not Applicable		
Suite, Apt. #, etc. [Suite, Apt. #, etc.						5. Certificate of Status Desired			Additional	
27						5. Continued of Glades Desired		Fee Re	equired	
City & State City & State						6. Election Campaign Financing	_	\$5.00	May Be	
23	3 28					Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Co	untry		8. This corporation has liability fo			. 199.032	
24	25	29	30				∐ Yes [
·	9. Name and Address of Curre	int Registered Agent				10. Name and Address of New F	egistered	Agent		
TUBMAN, RONALD W					81 Name					
124 MARGO LANE LONGWOOD FL 32750				82 Street Address (P.O. Box Number is Not Acceptable)						
				83						
				84	City			85 Zip	Code	
				"	Oily		FL		0000	
11. Pursuar	nt to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	atutes, the a	bove	named corp	poration submits this statement for the	purpose o	f changing i	ts registered	
ott-de o agent l	or registered agent, or both, in the Stat I am familiar with, and accept the obli	e of Florida. Such change wa pations of, Section 607,0505.	as autnorize Florida Sta	ea by Stutes	the corporat	tion's board of directors, I hereby acc	ept the app	omiment as	registered	
SIGNATURE		3							•	
SIGNATURI	Signature, typed or printed name of registered as	gent and trie if applicable (f	NOTE: Register	ed Age	nt signature requi	red when reinstating)	DATE			
12.	OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND			
TITLE	PD	DELETE		1.1 TITLE				☐ Change	Addition	
NAME	TUBMAN, RONALD W 124 MARGO LANE		1.21	1.2 NAME						
STREET ADDRES			1.3 9	STREET	ADDRESS					
CHTY - ST - ZIP	LONGWOOD FL 32750		1,4 (1,4 CITY - ST - ZIP						
TITLE	TD DELETE		2.1 1	2.1 TITLE				Change	Addition	
NAME	TUBMAN, JANICE A		2.21	NAME	Ì					
STREET ADDRES	124 MARGO LANE		2.33	STREET	address					
CITY - ST - ZIF	LONGWOOD FL 32750		2.4	2. 4 CITY-ST-ZIP		•				
TIILE	S DELETE		3.17	3.1 TITLE				Change	Addition	
NAME	TUBMAN, LISA		3.21	3.2 NAME						
STREET ADDRES			335	STREET	ADDRESS					
CHY-ST-ZIF	LONGWOOD FL 32750		3.4.	CITY-S	I-ZIP					
Title		DELETE		ITLE				Change	Addition	
NAME	1		4. 2	NAME						
STREET ADDRES	is		4.3 5	STREET	ADDRESS					
CITY-ST-ZIP				CITY - S						
TITLE)	DELETE		TITLE	· · · · · · · · · · · · · · · · · · ·			Change	Addition	
NAME			5.21	NAME	-					
STREET ADDRES	.s.				ADDRESS					
CITY - ST- ZIP	·			CITY-S	Į					
Tillé		DELETE		IITLE				Change	Addition	
	1				1					
			621	IAME	l					
NAMI PERFECT AND BLO	· ·			NAME STREET	VDUBECC					
STREET ADDRES CITY: ST-ZIP	s		6.3 5		ADORESS					

I. I do hereby certify that the information supplied with this filing does not quality 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 truspec 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:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4-9-97 331-

331-85 TA