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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000040062 (8)

JERRON DECKING & PAINT, INC.

FILED Apr 09 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address				e tongenne ein thine beite noite nater abeit aneit afert deret drein drein grein ifet ibb:			
124 MARGO		124 MARGO LANE								
LONGWOOD FL 32750		LONGWOOD FL 32750				DO NOT WRI	TE IN THIS	SPACE		
						3. Date Incorporated or Qualified		O. FIOL		
						05/15/1995				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		A	plied For	
21		26				59-3316232		No.	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			**.******	5. Certificate of Status Desired			Additional	
22		27				b. Certificate of Status Desired	<u></u>	Fee R	equired	
City & Stat	е	City & State			6. Election Campaign Financing	_		May Be		
23		28	<u>-</u> -			Trust Fund Contribution			to Fees	
Zip	Country	Zip		untry	,	8. This corporation owes or has				
24	[25]	29	30	_		Personal Property Tax due Jui			_l No	
	g, Name and Address of Curre	ini riegisterea Agent		81	Name	10. Name and Address of New I	redisteled	Agent		
	BMAN, RONALD W				1401116					
	4 MARGO LANE				Street Address (P.O. Box Number is Not Acceptable)					
LO	NGWOOD FL 32750			63						
				84	City		FL	85 Zip	Code	
44 Durana	to the provinces of Castrons COZ OF	02 and 607 1609 Florida Con	utae the s	here	a named see	poration submits this statement for the		f changing !	te registered	
office or r agent. I a	egistered agent, or both, in the Stat im familiar with, and accept the oblig	e of Florida Such change was gations of, Section 607.0505, I	s authorize Florida Sta	ed by	the corporat	ion's board of directors. I hereby acc	ept the app	ointment as	registered	
SIGNATURE	Signature, typed or printed name of registered as	data and title Victorian Victorian tour	OTE: Basis!	ad Ann	int clane) we see the	ed when reinstating)	DATE			
12,		ND DIRECTORS	13.	ou Aye	an argundate requir	ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12	
TITLE	PD	DELETE	1.1 T	ITLE	7			☐ Change	☐ Addition	
NAME I	TUBMAN, RONALD W		- 1	IAME	j			- •	_	
STREET ADDRESS	124 MARGO LANE				ADDRESS					
CITY-ST-ZIP	LONGWOOD FL 32750		1							
TITLE	TD TD			1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition	
NAME	TUBMAN, JANICE A		- 1	IAME	Ì					
STREET ADDRESS	124 MARGO LANE		4		ADDRESS					
CITY-ST-2IP	LONGWOOD FL 32750				ST-ZIP					
TITLE	S	DELETE	3.1 T		, E11			Change	Addition	
NAME	TUBMAN, USA			IAME	1				_	
STREET ADDRESS	124 MARGO LANE		1		ADDRESS					
CITY-ST-ZIP	LONGWOOD FL 32750	٠,			ST-ZIP					
TITLE		DELETE	4.1.1		-:			Change	Addition	
NAME			3/	NAME						
STREET ADDRESS			1		ADDRESS					
CITY-ST-ZIP				ITY-S						
TITLE		DELETE	5.1 1		1, 411			Change	Addition	
NAME			5.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE		HTY-S	1 - 219	· · · · · · · · · · · · · · · · · · ·		Change	Addition	
TITLE		□ nettif	6.11		İ			☐ Criange	L. ADUIDON	
NAME				MME						
STREET ADDRESS					ADDRESS					
CITY OF TIP	l		647	NTV C	T_71D					

14. Thereby 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.

3-26-98