

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

FILED

**Feb 27 1998 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1998**



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

DOCUMENT # P95000041191 (4)

1. Corporation Name
JCBH PROPERTIES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**45 N BEAL PKWY
FT WALTON BCH FL 32548
US**

Mailing Address
**PO BOX 1600
FT WALTON FL 32549
US**

3. Date Incorporated or Qualified
05/25/1995

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-3358175		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		Zip		Country	
24		25		29		30	

9. Name and Address of Current Registered Agent
**BARKER, GENE G
45 N BEAL PKWY
FT WALTON BCH FL 32548**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAY, J. STEVE	12 NAME	
STREET ADDRESS	1234 AIRPORT ROAD, STE. 130 -	13 STREET ADDRESS	30474 A Emerald Coast Pkwy. # 1201
CITY-ST-ZIP	DESTIN FL 32541	14 CITY-ST-ZIP	Destin FL 32541
TITLE	D <input type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARKER, GENE G	22 NAME	45 Beal Pkwy
STREET ADDRESS	1234 AIRPORT ROAD, STE. 130	23 STREET ADDRESS	Fort Walton Bch, FL 32548
CITY-ST-ZIP	DESTIN FL 32541	24 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUMMINS, MARJORIE L	32 NAME	45 Beal Pkwy
STREET ADDRESS	1234 AIRPORT ROAD, STE. 130 -	33 STREET ADDRESS	FWB, FL 32548
CITY-ST-ZIP	DESTIN FL 32541	34 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENDERSON, JOSEPH W	42 NAME	45 Beal Pkwy
STREET ADDRESS	1234 AIRPORT ROAD, STE. 130	43 STREET ADDRESS	FWB, FL 32548
CITY-ST-ZIP	DESTIN FL 32541	44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(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.

SIGNATURE: *Gene G. Barker* **Gene G. Barker** 1/29/98 (850)244-5121

CR2E034 (10/97)