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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000042629

1. Corporation Name

J & J WOODARD, INC.

Principal	Place	of B	usiness

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90138 041 ***150.00



Principal Place of Busin	ess	Mailing Address						
16 PARADISE LANE TREASURE ISLAND FL 33706 TREASURE ISLAND FL 33706				DO NOT WRITE IN THIS S	PACE	<u> </u>		
					3.	Date Incorporated or Qualifed		
					1	06/01/1995		
2. Principal Place of Bu	rsiness	2a. Mailing Address			4.	. FEI Number		Applied For
1		26				59-33175 <u>18</u>		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired	•	75 Additional ee Required
City & State		City & State	-	=:	6.	Election Campaign Financing		.00 May Be ded to Fees
Zip	Country 25	Zip Co 29 30	intry		8.	This corporation owes the current year Intal Personal Property Tax.	ngible Yes	. □No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
220124 101			81	Name				
BROIDA, JOEL D ESQ. 605 - 75TH AVENUE ST. PETERSBURG BEACH FL 33706		82	Street Addres	fress (P.O. Box Number is Not Acceptable)				
		83						
			84	,		FL		Zip Code
office or registered	agent, or both, in the State of	and 607.1508, Florida Statutes, the af Florida. Such change was authorize ons of, Section 607.0505, Florida Sta	d by i	the corporation	ration n's bo	on submits this statement for the purpose of cloard of directors. I hereby accept the appoint	hangir ment	ig its registered as registered
SIGNATURE								

NAME STREET ADDRESS 16 PARADISE LANE 1.3 STREET ADDRESS 17HEASURE ISLAND FL 33706 1.4 CITY-ST-ZIP 17HE 1 VP 1 DELETE 1.3 STREET ADDRESS 1 TREASURE ISLAND FL 33706 1.4 CITY-ST-ZIP 17HE 1 VOODARD, JANICE M 16 PARADISE LANE 22 STREET ADDRESS 16 PARADISE LANE 23 STREET ADDRESS 17HEASURE ISLAND FL 33706 1.4 CITY-ST-ZIP 17HE 1 DELETE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 17HE 1.5 DELETE 1.5 STREET ADDRESS 1.6 CITY-ST-ZIP 17HE 1.5 STREET ADDRESS 1.6 STREET ADDRESS 1.6 STREET ADDRESS 1.6 STREET ADDRESS 1.7 ST-ZIP 17HE 1.7 ST-ZIP 1	agonti	, , , , , , , , , , , , , , , , , , ,					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 12	SIGNATURE	Standard a product or printed name of requiremed agent and title if prolicable (NOTE: Re	gistered Agent signature required	when reinstating)	DATE	——	
TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	gistates Again Signature (State State Stat				
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TREASURE ISLAND FL 33706	NAME	WOODARD, JOSEPH W	1.2 NAME	•			
TITLE	STREET ADDRESS	16 PARADISE LANE	1.3 STREET ADDRESS	-		,	
NAME	CITY-ST-ZIP	TREASURE ISLAND FL 33706	1.4 CITY-ST-ZIP	<u>,</u>			
STREET ADDRESS 16 PARADISE LANE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	TITLE	VP DELETE	2.1 TITLE		☐ Change	☐ Addition	
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TITLE	STREET ADDRESS	16 PARADISE LANE	2.3 STREET ADDRESS				
NAME	CITY-ST-ZIP		2.4 CITY-ST-ZIP				
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	CITY-ST-ZIP				the constant of the state of th	- F 4'	

indicated on this annual report or 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 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 other like empowered.

SIGNATURE: