

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

FILED
Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000043457 (7)
1. Corporation Name:

JRS Builders, Inc.

Principal Place of Business: Copeland Industrial Park
SPACE NE 8
ALACHUA, FL 32615
Mailing Address: P.O. Box 1108
ALACHUA, FL 32616

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Qualified 06/06/1995	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 59-332-7214	Applied For Not Applicable
23. Zip	24. Country	28. Zip	29. Country	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	

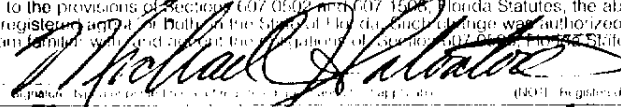
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

(Same Agent: only address chgd)

81. Name	Michael J. Salvatore
82. Street Address (P.O. Box Number is Not Acceptable)	305 NW 6th Street
83. City	High Springs, FL
84. Zip Code	32643

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. I am familiar with and accept the responsibility of executing this statement in accordance with the provisions of Sections 607.0502 and 607.1508, Florida Statutes.

SIGNATURE:  DATE: 3-20-98

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	President	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Michael J. Salvatore		1.2 NAME		
STREET ADDRESS	305 NW 6th Street		1.3 STREET ADDRESS		
CITY-ST-ZIP	High Springs, FL 32643		1.4 CITY-ST-ZIP		
TITLE	Sec. Treas.	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	Anderson, Roy S.		2.2 NAME		
STREET ADDRESS	P.O. Box 967 N/A		2.3 STREET ADDRESS		
CITY-ST-ZIP	Alachua, FL 32616-0967		2.4 CITY-ST-ZIP		
TITLE	James Anderson	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 there is a person or persons 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 if an addition.

SIGNATURE:  DATE: 3/20/98 904/418-1132

CR2E034 (10/97)