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

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

3. Date Incorporated or Qualified
06/06/1995

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number
59-332-7214
☐ Applied For
☐ Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip
24

Country
25

Zip
29

Country
30

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

(Same agent: only address chg'd)

10. Name and Address of New Registered Agent

81 Name: Michael J. Salvatore

82 Street Address (P.O. Box Number is Not Acceptable): 305 NW 6th Street

83

84 City: High Springs, Fla **FL** 85 Zip Code: 32643

11. Pursuant to the provisions of Section 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: Michael Salvatore (Signature of Registered Agent required when reinstating) DATE: 3-20-98

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	President	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	Michael J. Salvatore		22 NAME		
STREET ADDRESS	305 NW 6th street		23 STREET ADDRESS		
CITY-ST-ZIP	High Springs, FL 32643		24 CITY-ST-ZIP		
TITLE	Sec. Treas.	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	Anderson, Roy S.		32 NAME		
STREET ADDRESS	PO. Box 967 N/A		33 STREET ADDRESS		
CITY-ST-ZIP	Alachua, FL 32616-0967		34 CITY-ST-ZIP		
TITLE	~~Vice President~~	☒ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	~~Jerry Anderson~~		42 NAME		
STREET ADDRESS			43 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

6/6/3

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***150.00

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 added by this report.

SIGNATURE: Michael Salvatore 3/20/98 904/418-1132
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)