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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

14. I do nereby certify that the information synformation indicated on this annual robot I am an officer or director of the corporat appears in Block 12 or Block 13 if of the

SIGNATURE:

DOCUMENT # P95000053609 (0)

Mailing Address

REEGER-JACKSON ASSOCIATES, INC.

2441 NW 43RD STREET. UNIT 28 GAINESVILLE FL 32606		2441 NW 43RD STREET. UNIT 26 Gainesville fl 32806-8676								
				·		3. Date incorporated or Qualified 07/12/1995	1	e of Last R 5/1996		
2. Principal Pl	acé of Business	28. Mailing Address				4. FEI Number		þ	oplied For	
21		26				59-3324414			ot Applicable	
Surte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	<u>X</u>	\$8.75 Fee Re	Additional equired	
City & State	o .	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees	
Zip 24	25 29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No						
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered A	gent		
REE	GER, RALPH L		8	1 Nan	ne					
2441 NW 43RD STREET, UNIT 26 GAINESVILLE FL 32606				2 Stre	et Addres	et Address (P.O. Box Number is Not Acceptable)				
			8	3						
			8	4 City	,		FL	85 Zip	Code	
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida Such change wa pations of, Section 607,0505,	as authorized Florida Statut	by the c es.	corporation	ation submits this statement for the p i's board of directors. I hereby accep	ot the appo	changing It intment as	s registered registered	
4A	Signature, typed or printed name of registered ag	ient and title if applicable. [f	NOTE: Registered A	gent signa	ature required		DATE COC AND	DIDECTOR	2C (N) 40	
12. Title		DELETE	1.1 Tift.	-		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
	DPT DAILBUIL	hand Dettor						Criange	L Addition	
NAME	REEGER, RALPH L	T 00	1.2 NAM		00				i	
STREET ADDRESS	2441 NW 43RD STREET, UNI GAINESVILLE FL 32606	1 20	1	ET ADDRES	22					
CHY+SI+ZIP THLE	DVS	DELETE	2.1 1111.0	-ST-ZIP			<u></u>	Change	Addition	
NAME	JACKSON, DAVID M		22 NAM		1		,	Olibrigo	Figures.	
STHEEL ACORESS	2441 NW 43RD STREET, UNI	T 00		l et addres		ψ >	ر فوره			
1	GAINESVILLE FL 32606	1 20	1		33 [
CHY-ST-ZiP TITEE	CHARLESTILLE LE 32000	DELETE	3.1 TITU	-ST-ZIP		THE STATE OF THE S		Change	Addition	
NAME			3.2 NAM		1		•			
STREET ADDRESS			B	et addres	ss					
City - St - 712			4	-ST-ZIP						
THE		DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NA		l l			· · •		
STREEL ADDRESS				et addres	ss					
CHY-ST-ZIP				-ST-ZIP	1					
TILLE		DELETE	51 TITL					Change	Addition	
NAME			5.2 NAM					•		
STREET ADORESS				ET ADDRES	ss					
CITY - ST - ZIF				- ST - ZIP						
Tillif		DELETE	6.1 TITL					Change	Addition	
NAMí			6.2 NAM					. •		
STREET ADDRESS		_	1	et addre:	ss					
STREET SPECIFS		1	0.3 3 7 7	AUUNE	~				ļ	

d with this filled, does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the foceing or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name