

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000053942 (5)**

1. Corporation Name

W.G. JAECKEL INDUSTRIES, INC.



Principal Place of Business

1024 ALCALA DR.
ST. AUGUSTINE FL 32086

Mailing Address

1024 ALCALA DR.
ST. AUGUSTINE FL 32086

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/10/1995

3a. Date of Last Report

4. FET Number

59-3326207

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

g. Name and Address of Current Registered Agent

JAECKEL, WILLIAM G
1024 ALCALA DR.
ST. AUGUSTINE FL 32086

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0603, Florida Statutes.

SIGNATURE

Signature of Current Registered Agent (print name and title)

Signature of New Registered Agent (print name and title)

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME DELETE

DPST
JAECKEL, WILLIAM G
1024 ALCALA DR.
ST. AUGUSTINE FL 32086

12.2 NAME DELETE

12.3 NAME DELETE

12.4 NAME DELETE

12.5 NAME DELETE

12.6 NAME DELETE

12.7 NAME DELETE

12.8 NAME DELETE

12.9 NAME DELETE

12.10 NAME DELETE

12.11 NAME DELETE

12.12 NAME DELETE

12.13 NAME DELETE

12.14 NAME DELETE

12.15 NAME DELETE

12.16 NAME DELETE

12.17 NAME DELETE

12.18 NAME DELETE

12.19 NAME DELETE

12.20 NAME DELETE

12.21 NAME DELETE

12.22 NAME DELETE

12.23 NAME DELETE

12.24 NAME DELETE

12.25 NAME DELETE

12.26 NAME DELETE

12.27 NAME DELETE

12.28 NAME DELETE

12.29 NAME DELETE

12.30 NAME DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST., ZIP

13.5 TITLE Change Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, ST., ZIP

13.9 TITLE Change Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, ST., ZIP

13.13 TITLE Change Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, ST., ZIP

13.17 TITLE Change Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY, ST., ZIP

13.21 TITLE Change Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY, ST., ZIP

13.25 TITLE Change Addition

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, ST., ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 for the receiver or trustee or 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 as applicable, if within address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W.G. Jaeckel

2.2.96 909.799.A73

CR2E034 (12/95)