

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000055065 (3)

1. Corporation Name

JNM MARSH DUNES, INC.



Principal Place of Business

2453 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

Mailing Address

2453 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

3. Date Incorporated or Qualified
07/12/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3328420

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HATHAWAY, RICHARD G
7077 BONNEVAL ROAD
SUITE 200
JACKSONVILLE FL 32216

81

Name

James N. McGarvey, Jr.

82

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

2453 S. Third Street

83

84

City

Jacksonville Beach FL

85

Zip Code

32250

11. Pursuant to the provisions of Sections 607.0602 and 607.1504, 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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

JAMES N. MCGARVEY JR

5/13/96

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

MCGARVEY, JAMES N JR
2453 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

D
MCGARVEY, PAULA S
2453 SOUTH THIRD STREET
JACKSONVILLE BEACH FL 32250

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

000001842000

-05/29/96--01021--031

***200.00

☐ Change

☐ Addition

14. I do 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)(ix), 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 Book 12 or Book 15 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]
James N. McGarvey Jr. President

4-15-96

904-247-9160

Date

Telephone Number

CR2E034 (12/95)