

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000061045 (7)

1. Corporation Name

YOUNG AND SON DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

11801 LORETTO SQUARE DRIVE SOUTH  
JACKSONVILLE FL 32223

11801 LORETTO SQUARE DRIVE SOUTH  
JACKSONVILLE FL 32223



2. Principal Place of Business

2a. Mailing Address

21. same

26. same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. 25. 26. 27. 28. 29. 30.

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

08/08/1995

3a. Date of Last Report

8-8-95

4. FEI Number

59-332 9398

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 ☒

10. Name and Address of New Registered Agent

81. Name

A. J. Young

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

11801 Loretto Sq. Dr. S.

84. City

Jacksonville, FL

FL

85. Zip Code

32223

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, 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

Signature of person or printed name of registered agent and title, applicable

(NOTE: Registered Agent signature required when reappointing)

6/20/96

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
PSTD YOUNG, ANGELA J 11801 LORETTO SQUARE DRIVE SOUTH JACKSONVILLE FL 32223

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP

61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP

71 TITLE 72 NAME 73 STREET ADDRESS 74 CITY-ST-ZIP

81 TITLE 82 NAME 83 STREET ADDRESS 84 CITY-ST-ZIP

91 TITLE 92 NAME 93 STREET ADDRESS 94 CITY-ST-ZIP

01 TITLE 02 NAME 03 STREET ADDRESS 04 CITY-ST-ZIP

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01 TITLE 02 NAME 03 STREET ADDRESS 04 CITY-ST-ZIP

SIGNATURE:

ANGELA J. YOUNG PSTD

6/20/96

904 8862958

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)