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FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000061465 (7)

1. Corporation Name

JACQUELYN HAYWARD DESIGN STUDIO, INC.



Principal Place of Business

770 INDIAN BEACH LANE
SARASOTA FL 34234

Mailing Address

770 INDIAN BEACH LANE
SARASOTA FL 34234-5745

2. Principal Place of Business

21 543 MADISON COURT

Suite, Apt. #, etc.

22 SARASOTA

City & State

23

Zip

24 FL 34236

Country

25 USA

2a. Mailing Address

26 543 MADISON COURT

Suite, Apt. #, etc.

27 SARASOTA

City & State

28

Zip

29 FL 34236

Country

30 USA

3. Date Incorporated or Qualified

08/09/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0614608

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

GOODBODY, KEVIN
770 INDIAN BEACH LANE
SARASOTA FL 34234

10. Name and Address of New Registered Agent

81 Name

GOODBODY, KEVIN

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

543 MADISON COURT

83

SARASOTA

84 City

SARASOTA

FL

85 Zip Code

34236

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 607.0509, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, as applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

22 APRIL 1997

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D GOODBODY, KEVIN
STREET ADDRESS
770 INDIAN BEACH LANE
CITY - ST - ZIP
SARASOTA FL 34234

TITLE ☐ DELETE

NAME
D HAYWARD, JACQUELYN
STREET ADDRESS
770 INDIAN BEACH LANE
CITY - ST - ZIP
SARASOTA FL 34234

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

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TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
GOODBODY, KEVIN

1.3 STREET ADDRESS
543 MADISON COURT

1.4 CITY - ST - ZIP
SARASOTA FL 34236

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
HAYWARD, JACQUELYN

2.3 STREET ADDRESS
543 MADISON COURT

2.4 CITY - ST - ZIP
SARASOTA FL 34236

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22 APRIL '97 (941) 954 5022

Date

Daytime Phone #

0426973

CR2E034 (9/96)