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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 13 1997 8:00am

Secretary of State

Change Addition

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000074342 (3)

THE JUDD COMPANY, INC.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Principal Place of Business Mailing Address

2235 ALAMEDA AVE.
SARASOTA FL 34234
SARASOTA FL 34234-8313

3. Date Incorporated or Qualified 3a. Date of Last Report

2235 ALAMEDA AVE. SARASOTA FL 34234				2235 Alameda ave. Sarasota Fl 34234-8313							
								3. Date incorporated or Qualified 09/26/1995	3a. Date 03/19		leport
2. Principal Place of Business				2a. Mailing Address			4. FEI Number	•	A	oplied For	
21			26				65-0616032 Not Applicable				
Suite 22	e, Apt. #, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State				City & State				6. Election Campaign Financing		\$5.00	May Be
23			28		<u>-</u>			Trust Fund Contribution		Added	to Fees
Zip	Country		ļ ₁	·		untry	v. This corporation has habilit		for intangible tax under s. 199.032,		
24	25 9. Name and Address of Current		29	tored Agent	30			Florida Statutes 10. Name and Address of New Reg	Yos 🗌		
			eilt negit	stereu Agent		81	Name	10. Name and Address of New Re	gistered Ag	ent	
	JUDD, BARB						T Venille.				
]	2235 ALAME SARASOTA I			82 Street Address (P.O. Box Number is Not Accepte			le)				
	SARASUIA	PL 34234				B3			· · · · · · · · · · · · · · · · · · ·		
						53					
						84	City		E=1	85 Zip	Code
11 Pu	reuent to the pro	wisions of Sections 607 (502 and 6	07 1508 Florida Stat	tutos tho s	l strong	n.named co	orporation submits this statement for the p	Urnee of ch	nancino il	te registered
offi	ce or registered	lagent, or both, in the Sta	ate of Flori	da. Such change wa	s authorize	ed be	v the corpor	ration's board of directors. I hereby accep	the appoir	ntment as	registered
_		r with, and accept the ob	ligations o	r, Section 607.0505,	Florida Sta	atute:	S.				
SIGNA	TURE Signature, ly	yped or printed name of registeria	agent and be	od sophrable (N	Oil Ecosion	ed Age	erl signature rec	quired when reinstating)	DATE		
12.	<u></u>	OFFICERS /			13.			ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR	S IN 12
TITLE	D			DELETE	111	ITLE		And the second s		Change	Addition
NAME	JUDD,	Barbara L			1.21	IAME					
STREET AL		Lameda ave.			135	318E61	ADDRESS				
CITY-ST-	ZIP SARAS	OTA FL 34234			140	OTY - S	SI - 7IP				
TITLE				DELETE	211	ITLE				Change	Addit:on
NAME					221	MAME					
STREET AL	ODRESS				235	STREET	ADDRESS				
CITY-ST-	ZIP				7.4	CAY:	ST · ZIP				
TITLE				☐ DELETE	311	ITLE				Charige	Addition
NAME					321	MAME					
STREET AL	DORESS				335	STREET	FADDRESS				
CITY-ST-	ZIP				34.	Cily-:	S1 - Z(P				
TITLE				DELETE	411	IILE				Change	Addition
NAME	-				4 2	NAM:					
STREET AL	ODRESS				435	STREET	ADDRESS				
CITY-ST-	ZiP				440	STY-S	ST - 71P				
TITLE				DELETE	517	IIIE	1			Change	Addit on
NAME					521	IAM:					

14. I do hereby certify that the information supplied with this filling 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 on an attachment with an address.

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$T - ZIP

€17HTE

6.2 NAME

and the state of t

DELETE