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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000075428 (9)

JACKSON COOKIE COMPANY, INC.

Country

9. Name and Address of Current Registered Agent

SIGNATURE: PW JACKSON P.W. Jank (STATE OF BIGHING OFFICER OR DIRECTOR

25

| Principal Place of Business |
|-----------------------------|
| 2712 BELLWOOD DRIVE |

Suite, Apt. #. etc.

City & State

21

22

23

24

Zip

2. Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

2712 BELLWOOD DRIVE BRANDON FL 33511-7112

FILED Apr 30 1997 8:00am Secretary of State



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

10. Name and Address of New Registered Agent

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

04/26/1996

B13-LL2-1400

0345479

3. Date Incorporated or Qualified

09/26/1995

59-3337388

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

| JACKSON, KEVEN D 2712 BELLWOOD DRIVE BRANDON FL 33511 | | | 81 | | et Address (P.O. Box Number is Not Acceptable) | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------|-------------|----------------|---------------------------------------------------|----------|--|
| — | | | 83 | | | | |
| | | | 84 | | FL 85 Zip Code | | |
| 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 Styrict in spired or profited name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | |
| 12. | OFFICERS AND DIRECTO | ···- | 13. | on a direction | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | —∣ം | |
| TITLE | TD | DELETE | 1.1 YITLE | | ☐ Change ☐ Add | ition 6 | |
| NAME | JACKSON, KEVEN D | | 1.2 NAME | | | 4 | |
| STREET ADDRESS | 2712 BELLWOOD DRIVE | | 1.3 STREET | ADDRESS | , | [2 | |
| CITY ST-ZIP | BRANDON FL 33511 | | 1.4 CITY-3 | ST-71P | | CR2E034 | |
| THILE | P | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Add | ition (5 | |
| NAME | JACKSON, CYNTHIA J | | 2.2 NAME | | | - 1 | |
| STREET ADDRESS | 2712 BELLWOOD DRIVE | | 2.3 STREE | ADDRESS | | 1 | |
| CHY-ST-ZIP | BRANDON FL 33511 | | 2. 4 CITY - | ST-ZIP | en e | { | |
| THILE | V | DELETE | 3.1 TITLE | | Change Add | ilion | |
| NAME | JACKSON, BEVERLY A | | 3.2 NAME | | JACKSON BELEVINA. | - [| |
| STREET ADDRESS | 3301 GRAY FOX COVE | | 3.3 STREET | ADDRESS | JUNE MARINGARIT CH | [| |
| CITY-ST-ZIP | APOPKA FL 32703 | | 3.4. CITY- | ST-ZIP | VALA100, 146. 33594 | } | |
| TITLE | \$ | DELETE | 4.1 TITLE | | S Change Add | ition | |
| NAME | JACKSON, PHILLIP W | | 4. 2 NAME | | JACKBON, Phillip W. | J | |
| STREET ADDRESS | 3301 GRAY FOX COVE | | 4.3 STREET | ADDRESS | JACKBOW, Phillip W. ZUB WRAWCHIEFCIR. | | |
| CITY-ST-ZIP | APOPKA FL 32703 | | 4.4 C(TY-5 | ST-ZIP_ | VALA160 146.33894 | _ | |
| TILLE | | ☐ DELETE | 5.1 TITLE | | Change Add | ition | |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | |
| CITY-SI-ZIP | | | 5.4 CITY-5 | ST-ZIP | |] | |
| TUTLE | | ☐ DELETE | 6.1 TITLE | | Change Add | ition | |
| NAME | | | 6.2 NAME | | | - 1 | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | . | |
| CITY-S1-76 | | | 64 CITY - 5 | | | | |
| 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 truster or the receiver or truster or the receiver or truster appears in Block 12 or Block 13 if changed, or on an attachment with an address. | | | | | | | |

Country

81 Name

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