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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000078457 (5)

FILED Jan 15 1998 8:00am Secretary of State

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JEN FI	NANCIAL SERVICES, INC.				
021111				C (881198) 118 18181 Water Water 88111 WA	16 8941 48 apr carte 81891 acres 1884 1881
					}
Principal Plac	e of Business	Mailing Address			
3737 VILLAGE GREEN DRIVE 3737 VILLAGE GREE			VE		
SARASOTA FL 34239 SARASOTA FL 34239			vL	1	
OAINOOTK I	L 04200	OARBOOTT I E DIEGO		DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	
				1	
				10/06/1995	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0621807	Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		<u> </u>		Certificate of Status Desired	Fee Required
		27			
City & State	ė	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pai	d the current year Intangible
24	25	29	30	Personal Property Tax due June	- ' - T
	9. Name and Address of Curren		30	10. Name and Address of New Reg	
 ,		t negistered Agent	04 11	IU. Name and Address of New Hey	Jistered Agent
NE	UNFELDT, JOHN E		81 Name		
	37 VILLAGE GREEN DRIVE		82 Street Addre	ess (P.O. Box Number is Not Acceptable	(a)
	RASOTA FL 34239		621 Street Addit	ess (F.O. box Nulliber is Not Acceptable	le)
SA	RASUIA FL 34239		83		
			65		i
			84 City		85 Zip Code
			Oity		FL S Zip Code
11 Purcuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statute	s the above named corn	oration submite this statement for the n	
office or r	egistered agent, or both, in the State	of Florida, Such change was a	thorized by the corporati	on's board of directors. I hereby accep	t the appointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statutes.	oration submits this statement for the proofs board of directors. I hereby accep	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SIGNATURE					• 1
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE	Registered Agent signature requin	ed when reinstating)	DATE
12.	OFFICERS ANI		13,	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
		- 0			_ Onling _ Frequent
NAME	neuenfeldt, John e		1.2 NAME		
STREET ADDRESS	3737 VILLAGE GREEN DRIVE		1.3 STREET ADDRESS		
CITY - ST - ZIP	SARASOTA FL 34239		1.4 CITY-ST-ZIP		{
TITLE	D	DELETE	2.1 TITLE		Change Addition
HILE	•	0	2:1 1)155		T orange T vacition
NAME	NEUENFELDT, JOANNE L		2.2 NAME		ļ
STREET ADDRESS	3737 VILLAGE GREEN DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL 34239		2. 4 CITY - ST - ZIP		
	OF THE OFFICE	DELETE			Change Addition
TITLE		L. Dereie	3.1 TITLE		C Cuanda C vontitots
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
			3.4, CITY-ST-ZIP		1
CITY-ST-ZIP		DELETE			Change Addition
TITLE		T DETELE	4.1 TITLE		L croside i vaculou
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
					}
CITY-ST-ZIP		T Selem	4.4 CITY - ST - ZIP		Change Addition
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		<u> </u>
STREET ADDRESS			5.3 STREET ADDRESS		1
					Į
CITY-ST-ZIP			5.4 CITY - ST - ZIP	······································	- Characa Latinus
TITLE		DELETE	6.7 TITLE		Change Addition
NAME			6.2 NAME		J
STREET ADDRESS			6.3 STREET ADDRESS		
3					
CUTY OF THE					
CITY - ST - ZIP	portify that the information arms that	th this filing does not gualify for	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I :	inther certify that the information

indicated on this annual report or supplied with this hind does not quality for the exemption stated in Section 1.19.07(3)(i), noticed statutes. Flutther 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 coprolation 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.