DOCUMENT # P95000084743         Corporation hame         D. J. CONTRACTING OF JACKSONVILLE. INC.         Incore If Business       Malling Address         ROUTE ALL SCORES       X38 FIGHETINGLE END.         Disconville FL 3220       X38 FIGHETINGLE END.         Disconviewer All Advisors       R         State, Apt. FL 400       State, Apt. FL 400         Toge Country       State, Apt. FL 400		PROFIT PORATION AL REPORT		Kather Secreta	ARTMENT OF STATE rine Harris any of State CORPORATIONS	May 06 Secreta	<b>ILED</b> , <b>1999 8:0</b> ary of Sta	0 am ate
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CKCONNULE FL 3220     JACKSONNULE FL 3220     JDD NOT WRITE IN 1HIS SPACE       9     3. Date incorporation of Qualified     10(3/01995)       Principal Place of Business     2a. Mailing Address     4. FEI Number       9     3. Date incorporation of Qualified     10(3/01995)       State, Act. #, etc.     5. State, Apt. #, etc.     5. Certicals of Status Depirint     State, Apt. #, etc.       210     Country     20     Country     8. Certicals of Status Depirint     State, Apt. #, etc.       210     Country     20     Country     8. Certicals of Status Depirint     State, Apt. #, etc.       210     Country     20     Country     8. Certicals of Status Depirint     Addition of the Application       210     Country     20     Country     8. Certicals of Status Depirint     Addition of the Application       210     Country     20     Country     8. Certicals of Status Depirint     Addition of the Application       211     Rame     COLD, KATHLEEN H     Internet repairing the Address of Cuurce Application of Status Depirint in the Acceptable)     Internet repairing the Address of Touring Biglistered Agent       310     Net neglistered Agent     10. Name and Address of Net Poiring Status Change of the application of Status Change of the application of the Acceptable)     Internet repairing the application of the acceptable of the acceptable of the acceptable of the acceptable of the a	incipal Place	of Business		Mailing Address			<b></b>	<b></b>
Principal Place of Business       2x       Mailing Address       4. FEI Number       Applied For         Suite, Apt. #, etc.       7       Suite, Apt. #, etc.       7       Suite, Apt. #, etc.       7         Suite, Apt. #, etc.       7       Suite, Apt. #, etc.       7       Suite, Apt. #, etc.       7         City & State       City & State       5. Certification Cargony Principa       5.5.00 May 5g         Zip       Country       Zip       Country       State       N       N         Zip       Country       Zip       Country       State       N       N       N         Joint       2a       So       Personal Property Tax.       N <td< td=""><td>CKSONVILLE P</td><td>-</td><td></td><td>JACKSONVILLE FL 32220</td><td></td><td></td><td></td><td>ı</td></td<>	CKSONVILLE P	-		JACKSONVILLE FL 32220				ı
Principal Place of Busines         2z.         Mailing Address         4.         FEI Number         Applied For           Suite, Apt. #, etc.         50-33443554         Nor Application         Sec.75         Address         Nor Application           City, & Strie         277         Country         S.         Contracte of Status Desired         Fee Required           City, & Strie         277         Country         8.         The Englished of Status         Address of Country         None and Address of Country         Vec         No           9.         Name and Address of Country         10.         Name and Address of New Registered Agent         10.         Name and Address of New Registered Agent         Vec         No           OLD, KATHLEEN H         0NE INDEPENDENT DR STE 2301         3d         Street Address (P.O. Box Number is Not Acceptable)         3d           JACKSONVILLE FL 32022         8d         City of Flords. Status         Street Address (P.O. Box Number is Not Acceptable)         3d         Address (P.O. Box Number is Not Acceptable)           JACKSONVILLE FL 3202         8d         City of Flords. Status         Street Address (P.O. Box Number is Not Acceptable)         3d							1	
Suite, Apt. #, etc.         20         Suite, Apt. #, etc.         Suite, Apt. #, etc.         Suite, Apt. #, etc.         Suite, Apt. #, etc.         Fee Required         Fee Required           City, & State         21         Suite, Apt. #, etc.         Suite, Apt. #, etc.         Suite, Apt. #, etc.         Fee Required           City, & State         22         Country         E. Election Campaign Financing         Addres to Fees           Zip         Country         28         Trust Fund Controllution         Addres to Fees           Zip         20         Country         8. This controllion ows the durrent yeer Intaing bit         Personal Property Tax         City Address of Current Registered Agent           OLD, NaTHLEEN H         0NE INDEPENDENT DR STE 2301         33         Street Address (P.O. Box Number is Not Acceptable)         83           JACKSONVILLE FL 3202         84         Street Address (P.O. Box Number is Not Acceptable)         83           Street Address of Current Registered Agent         10. Name and Address of Current Registered Agent         10. Personal Property Tax         10. Personal Property Tax           OPENCETS AND DIRECTORS         Scate Address (P.O. Box Number is Not Acceptable)         83         10. Personal Property Tax         10. Personal Property Tax           OPENCETS AND DIRECTORS         Scate Address (P.O. Box Number is Not Acceptable)         10	Principal Pla	ce of Business		⊢¬, <sup>−</sup>	· · · · · ·	4. FEI Number		
City & State         27/         City & State         6. Election Cempaign Financing         Added to Fees           Zip         Country         29         Country         8. This corporation owns the current year Intraining/bit           Zip         Zip         Country         8. This corporation owns the current year Intraining/bit           Personal Property Tax         Personal Property Tax         Personal Property Tax         Personal Property Tax           COLD, KATHLEEN H         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent         Personal Property Tax           COLD, KATHLEEN H         81         Name         82         Street Address of New Registered Agent         Fee Registered Agent           ONE INDEPTIDENT OR STE 2301         82         Street Address (P.O. Box Number is Not Acceptable)         Personal Property Accept Tax         Personal Property Accept Tax           Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Status corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the contraver the accept the optimits of the state of Florida. Such change was authorized by the contraver the accept the optimits the statement of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the contraver the accept the optimits the statement of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the cop	Suite, Apt. #	, etc.	••				<b>\$8.75</b>	Additional
Zip         True Fund Contribution         Added to Pees           Zip         Country         2         30         Presonal Property Tax.         Image and Address of Current Registered Agent         Image and Address of New Registered Agent         Image and Address and Address address address address address addreso addreson Address address addreson Address addreson Address ad	<u></u>						Fee Re	· · · · · · · · · · · · · · · · · · ·
28         29         30         Personal Property Tax         Image         No           2. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           COLD, KATHLEEN H         0NE INDEPENDENT DR STE 2301         81         Name         82         Street Address (P.O. Box Number Is Not Acceptable)         93           JACKSONVILLE FL 32202         83         64         City         FL         85         Zip Code           Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes.         the appointment as englistered agent.         64         City         FL         85         Zip Code           Pursuant to the provisions of Section 607 0502 and 607 1508. Florida Statutes.         the appointment as englistered agent.         64         City         FL         85         Zip Code           SNATURE         Demuts         The Amatt Law agent agent of other appointment as englistered agent.         Gottapoint agent agent agent of other appointment as englistered agent.         10         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12           SNATURE         D         DELETE         11 Th.E         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         24 MME         23 MME         24 MME         24 MME         24 MME	City & State		·			Trust Fund Contribution	Added t	
9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       COLD, KATHLEEN H ONE INDEPENDENT DR STE 2301 JACKSONVILLE FL 32202     92       B4     City     FL       B4     City   <	Zip		у					
COLD, KATHLEEN H ONE INDEPENDENT DR STE 2301 JACKSONVILLE FL 32202			ess of Current R	· · · · · · · · · · · · · · · · · · ·			Registered Agent	
ONE INDEPENDENT DR STE 2301 JACKSONVILLE FL 32202       az       Street Address (P.O. Box Number is not Audeplace)         Bit Street Address (P.O. Box Number is not Audeplace)       az       az       az         Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. In hereby accept the appointement as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.       Mainteent of the appointement as registered agent, and accept the appointement as registered of Odds, Such change was authonicably the corporation's board of directors. In hereby accept the appointement as registered agent, and accept the appointement as registered of Odds. Such change was authonicably to corporation statutes.       Unit of the appointement as registered agent, and accept the appointement as registered agent, and accept the appointement as registered of Odds. Such change was authonicably to corporation statutes.         INATURE       Dentifier       Dentifier       Unit of the appointement as registered agent and the second agent and the	COLD	). Kathleen h						
Image: Provisions of Sections 507.0502 and 607.1508. Florids 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 Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam , finalize th	ONE I	INDEPENDENT DR			82 Street Add	Iress (P.O. Box Number is Not Accep	table)	
Process St.2P  Proces	JACK	SONVILLE FL 32202	2		83			
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 agent. Tam Junits with and accept the above-named corporation submits this statement for the purpose of changing its registered agent. Tam Junits with and accept the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of changing its registered agent. Tam Junits with and accept the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of changing its registered agent. Tam Junits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits this statement for the purpose of the above-named corporation submits the statement for the purpose of the above-name corporation submits the statement for the purpose of the above-name corporation submits the statement for the purpose of the above-name corporation submits the statement for the purpose of the above-name corporation submits the statement for the purpose of the above-name corporation submits the statement for the statement for the purpose of the above-name down for the statement for the purpose of the above-name down for the statement for the statemen			_		05			
agent. I am Eqniliar with, and accepting objection 607.0505, Hondra Statutes.  Junce Durate D			_				FL 85 Zip (	Code
Stymutin, typed or affinite medicates         (NOTE: Requested Agent and the instruction)         (DATE: Topics AND DIRECTORS IN 12           E         D         OFFICERS AND DIRECTORS         13         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12           E         D         Intra-         Change         Addition           inter-         Intra-         Change         Addition           inter-         Intra-         Intra-         Change         Addition           inter-         Intra-         Intra-         Intra-         Addition           inter-         Intra-         Intra-         Intra-         Addition           inter-         Intra-         Intra-         Intra-         Intra-           inter-         Intra-         Intra-         Intra-         Intra-         Intra- <t< th=""><th>. Pursuant to</th><th>o the provisions of Sec</th><th>tions 607.0502 a</th><th>Florida, Such change was</th><th>84 City</th><th>poration submits this statement for the</th><th>FL</th><th>registered</th></t<>	. Pursuant to	o the provisions of Sec	tions 607.0502 a	Florida, Such change was	84 City	poration submits this statement for the	FL	registered
HAMILTON, DONNA J       12 NAME         EET ADDRESS       308 PICKETTVILLE ROAD       13 STREET ADDRESS        str.2p       14 OTV-ST-ZP         re       21 TITLE       Change         re       22 NAME         re       22 NAME         ret ADDRESS       23 STREET ADDRESS        str.2p       24 OTV-ST-ZP         ret ADDRESS       24 OTV-ST-ZP         ret EET ADDRESS       33 STREET ADDRESS        str.2p       34 OTV-ST-ZP         ret ADDRESS       33 STREET ADDRESS        str.2p       34 OTV-ST-ZP         ret ADDRESS       33 STREET ADDRESS        str.2p       34 OTV-ST-ZP         ret ADDRESS       44 OTV-ST-ZP         ret ADDRESS       44 OTV-ST-ZP         ret ADDRESS       42 NAME         ret ADDRESS       53 STREET ADDRESS        str.2p       44 OTV-ST-ZP         ret ADDRESS       54 OTV-ST-ZP         ret ADDRESS       53 STREET ADDRESS        str.2p      str.2p	Pursuant to office or reg agent. I am	o the provisions of Sec	tions 607.0502 a	Florida. Such change was ns of, Section 607.0505, Fl	84 City ites, the above-named corr authorized by the corporat orida Statutes.	poration submits this statement for th ion's board of directors. I hereby acce	FL	registered
E       HAMILTON, DONNA J       12 NAME         EET ADDRESS       308 PICKETTVILLE ROAD       13 STREET ADDRESS         -str.2p       14 CITV-ST-2P         E       21 TITLE         E       22 NAME         EET ADDRESS       23 STREET ADDRESS         .str.2p       24 CITV-ST-2P         E       21 TITLE         E       22 NAME         .str.2p       24 CITV-ST-2P         E       23 STREET ADDRESS         .str.2p       24 CITV-ST-2P         E       22 NAME         Str.2p       33 STREET ADDRESS         .str.2p       34 CITV-ST-2P         E       24 CITV-ST-2P         E       23 STREET ADDRESS         .str.2p       34 CITV-ST-2P         E       24 CITV-ST-2P         E       24 CITV-ST-2P         E       24 CITV-ST-2P         E       24 NAME         Str.2p       44 CITV-ST-2P         E       21 NAME         .str.2p       44 CITV-ST-2P         E       21 NAME         .str.2p       44 CITV-ST-2P         .str.2p       44 CITV-ST-2P         .str.2p       54 CITV-ST-2P         .s	Pursuant to office or reg agent. I am	b the provisions of Sec gistered agent, or both n familiar with, and acc Signature, typed or pointed name	tions 607.0502 a , in the State of ept the obligation of registered agent a	Florida. Such change was ns of, Section 607.0505, Fl D title if applicable (NOT	84 City authorized by the corporat orida Statutes. WNA J. HAM E: Registered Agent signature require	LLTON	FL   e purpose of changing its pot the appointment as re 4 - 14 - 99 DATE	registered gistered
JACKSONVILLE FL         14 GTY-ST-ZP           E              ☐ Change             ☐ Addition             ☐ Change             ☐ Change             ☐ Addition             ☐ Change             ☐ Change             ☐ Addition             ☐ Change             ☐ Addition             ☐ Change             ☐ Addition             ☐ Change             ☐ Change             ☐ Addition             ☐ Change             ☐ Change             ☐ Addition             ☐ Change             ☐ Addition             ☐ Change	Pursuant to office or reg agent. I am	b the provisions of Sec gistered agent, or both n familiar with, and acc Signature, typed or poiled name	tions 607.0502 a , in the State of ept the obligation of registered agent a	Florida. Such change was ns of, Section 607.0505, Fl Difference (NOT DIRECTORS	84 City authorized by the corporat orida Statutes. ANA J. HAM E: Registered Agent signature require 13.	LLTON	FL e purpose of changing its pot the appointment as re <u>4 - 14 - 99</u> DATE FFICERS AND DIRECTO	registered gistered
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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	Pursuant to office or reg agent, I am GNATURE E KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP	b the provisions of Sec gistered agent, or both familiar with, and acc Signature, typed or polited name C D HAMILTON, DONN 308 PICKETTVILLE	tions 607.0502 a , in the State of ept the obligation born little e of registered agent a DFFICERS AND A J ROAD	Florida. Such change was as of, Section 607.0505, Fi  DIRECTORS  DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	84       City         Ites, the above-named cordination of the corporation of the corporatin of the corpersecondecorporation of the corporation of the corpo	LLTON	FL         a purpose of changing its application of the appointment as response of change         Unite         Unite         FFICERS AND DIRECTO         Change         Change         Change         Change         Change         Change         Change         Change         Change         Change	registered gistered DRS IN 12 Addition Addition