## 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 # 1. Corporation Name P96000007173 (3)

J & B COMMUNITY MANAGEMENT, INC.

## **FILED** May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									1 10811881 119 10118 81111 00111 80111	<b>88</b> 411 <b>89</b> 411	SALII IGAAL HAIL IA	1848 1141 <del>10</del> 81	
6699 SAN CASA DR. O-1 ENGLEWOOD FL 34224				6699 SAN CASA DR. O-1 ENGLEWOOD FL 34224						DO NOT WRI	TE IN TH	IIS SPACE	
										<ol> <li>Date Incorporated or Qualifier</li> <li>01/19/1996</li> </ol>	t		
2. Principal Place of Business					2a, Mailing Address					4. FEI Number		A	Applied For
21				26						65-0641448		N	lot Applicable
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.						5. Certificate of Status Desired		·	Additional Required
City & State	В		Crty & State						6. Election Campaign Financing		\$5.00	D May Be	
23				28						Trust Fund Contribution			to Fees
Zip		Countr	У	Zip			Country			8. This corporation owes or has	paid the		`
24		25		29		30				Personal Property Tax due Ju			L] No
	and Addre	ss of Current F	legist	ered Agent		81	T 41		10. Name and Address of New	Register	ed Agent		
HORKY, JANICE R 8899 SAN CASA DR, Q-1 ENGLEWOOD FL 34224							82	Street	Addres	Wice Honky is (P.O. Box Number is Not Accep 104dos	able)	- Name of the state of the stat	
							84		ENG	Lewood		·L    34	Code 4223,
11. Pursuant to office or reagent. La	to the provis egistered ag m familiar wi	ions of Sec jent, or both th, and acc	tions 607.0502 and in the State of cept the obligation	and 60 Floridons of,	7.1508, Florida Statut a. Such change was Section 607.0505, Fl	tes, the author origa :	e abov ized by Statute:	e-named the corp s.	corpor poration	ation submits this statement for the	purpose the a	e of changing appointment as	its registered s registered
l			HORKY e of registered agony a			U_	2111	رمم	<u>R</u>	- Horkey when reinstaling)	DAT	4-27-	
12.		C	FFICERS AND D	DIRE C		7/1	13.		.,	ADDITIONS CHANGES TO OF	FICERS /		
TITLE	P				DELETE	V 1	.1 TITLE					Change	☐ Addition
NAME		, Robert				1	.2 NAME						
STREET ADDRESS			DR. BLDG Q-1			1	.3 STREET	ADDRESS					
CITY-ST-ZIP	ENGLEY	VOOD FL			D DC/ FTF		.4 CITY - S	T-ZIP	<del> </del> -				N 1 4 4 4 4
TITLE					☐ DELETE	- 1	1 TITLE		S+.	To Taking P		Change	Addition
NAME						- 1	.2 NAME		HO	RKY SHOTE N.			
STREET ADDRESS								ADDRESS	40	54804405	1122	2	
CITY-ST-ZIP TITLE			· · · · · · · · · · · · · · · · · · ·		DELETE	_	: 4 CITY-I I.1 TITLE	ST-ZIP	EA	RKY JANICE R. BARBADOS 19 Le wood, FL. 3	722.	⊃ ☐ Change	Addition
NAME					- Decert	- 1	.2 NAME			·		Onlings	Addition
STREET ADDRESS								ADDRESS					
CITY-ST-ZIP							.3 SINCE    .4. CITY-1						
TITLE					DELETE	_	.4. CHY-1	01-51L	<del> </del>			Change	Addition
NAME					<del>_</del>		. 2 NAME						
STREET ADDRESS						- 6		ADDRESS					
CITY-ST-ZIP							.4 CITY-S						
TITLE					DELETE		.1 TITLE		T			Change	Addition
NAME						5	.2 NAME						ļ
STREET ADDRESS								ADDRESS					1
CITY-ST-ZIP							4 CITY-9						1
TITLE		<del>.</del>			DELETE		.1 TITLE					Change	Addition
NAME .	.#					6	.2 NAME						
STREET ADDRESS	2					6	.3 STREET	ADORESS					
CITY-ST-ZIP	<u> </u>						.4 CITY-S						
	ertify that th	e informatio	on supplied with	this fil	ing does not qualify f				ed in Se	ection 119.07(3)(i), Florida Statutes	. I further	certify that th	e 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