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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
Division of Corporations

DOCUMENT # P96000012720 (4)

J & W COMMUNICATIONS, INC.

Principal Place of Business Mailing Address PO BOX 56-0312 PO BOX 56-0312 ROCKLEDGE FL \$2956-0312 ROCKLEDGE FL 32956-0312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/05/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3367978 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 Country Zip 8. This corporation owes or has paid the current year Intangible Zip Country Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 **WAYAEBO**YBHPAYPEE JASTRUBO, VIVIAN A. 1228 WALNUT GROVE WAY Street Address (P.O. Box Number is Not Acceptable) **ROCKLEDGE FL 32955-4630** 83 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. astrube VIVIAN A. JASTRUBO PRESIDENT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OLLICERS AND DIRECTORS 12. Change Addition DELETE 11300 £ TITLE WALTERS, BILLY L 1.2 NAME NAME 1228 WALNUT GROVE WAY 1.3 STREET ADDRESS STREET ADDRESS ROCKLEDGE FL 32955-4630 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE XX Change ☐ Addition PD 21 TITLE TITLE JASTRUBO, VIVIAN 🗛 🍃 2.2 NAME NAME 1228 WALNUT GROVE WAY 2.3 STREET ADDRESS STREET ADDRESS ROCKLEDGE FL 38955-4630 2 4 CITY - ST - 7/P CITY-ST-ZIP Change Addition 3.5 TIUE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP ___ DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TiTLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITL€ TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 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.