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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000013097 (6)

1. Corporation Name

MORROW INVESTMENT GROUP OF JACKSONVILLE, INC.

Principal Place of Business
2545 RED FOX RD
ORANGE PARK FL 32073-5644

Mailing Address
2545 RED FOX RD
ORANGE PARK FL 32073-5644



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/08/1996		3a. Date of Last Report	
21		26		4. FEI Number 59-3407800		Applied For Not Applicable	
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent MORROW, JEFFERSON W 1301 RIVERPLACE BLVD SUITE 2800 JACKSONVILLE FL 32207				10. Name and Address of New Registered Agent			
				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DP	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, MATTHEW E			1.2 NAME			
STREET ADDRESS	10219 SW 41ST AVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL 32607			1.4 CITY-ST-ZIP			
TITLE	DT	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, JOHN L			2.2 NAME			
STREET ADDRESS	2202 FOXWOOD DR			2.3 STREET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL 32073			2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		3.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, MARTHA			3.2 NAME			
STREET ADDRESS	2202 FOXWOOD DR			3.3 STREET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL 32073			3.4 CITY-ST-ZIP			
TITLE	DS	☐ DELETE		4.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, SARA W			4.2 NAME			
STREET ADDRESS	2549 RED FOX RD			4.3 STREET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL 32207			4.4 CITY-ST-ZIP			
TITLE	DV	☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, SUSAN S			5.2 NAME			
STREET ADDRESS	1820 SEMINOLE RD			5.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32205			5.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		6.1 TITLE	☐ Change ☐ Addition		
NAME	MORROW, JEFFERSON W			6.2 NAME			
STREET ADDRESS	1820 SEMINOLE RD			6.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32205			6.4 CITY-ST-ZIP			

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 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.

SIGNATURE:

[Signature]

2/20/97 (904)-394-5121

CR2E034 (9/96)