

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000023302 (8)

1. Corporation Name
JOLLYAN INC.

Principal Place of Business

11151 N.W. 20TH DRIVE
CORAL SPRINGS FL 33071

Mailing Address

11151 N.W. 20TH DRIVE
CORAL SPRINGS FL 33071



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/11/1996	
21 2744 NW 91ST AVE		26 2744 NW 91ST AVE		4. FEI Number 12-9648413	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23 CORAL SPRINGS, FLORIDA		28 CORAL SPRINGS, FLORIDA		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		Country	
24 33065		29 33065		30 BROWARD	
25 BROWARD		29 33065		30 BROWARD	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

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 607.0602 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	D	1.1 TITLE	D
NAME	BURFORD, LORRIMER A	1.2 NAME	BURFORD LORRIMER A
STREET ADDRESS	11151 N.W. 20TH DRIVE	1.3 STREET ADDRESS	2744 NW 91ST AVENUE
CITY-ST-ZIP	CORAL SPRINGS FL 33071	1.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	D	2.1 TITLE	D
NAME	BURFORD, JOYETT P	2.2 NAME	BURFORD JOYETT P
STREET ADDRESS	11151 N.W. 20TH DRIVE	2.3 STREET ADDRESS	2744 NW 91ST AVENUE
CITY-ST-ZIP	CORAL SPRINGS FL 33071	2.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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***150.00

14. I 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: *Lorimer A. Burford* LORRIMER A. BURFORD 4/20/98 (pm) 796-0881

CR2E034 (10/97)