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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P96000039545 (4)

BENNETT BROTHERS OF JACKSONVILLE, INC.

FILED
May 06 1998 8:00am
Secretary of State



Principal Plac	ce of Busines	is.	М	Mailing Address									
3816 FENWICK ISLAND DRIVE				3816 FENWICK ISLAND DRIVE									
JACKSONVII	LLE FL 32224	•		JACKSONVILLE FL 322	24					B0 N07.11		25465	
									-	Date Incorporated or Quali	RITE IN THIS	SPACE	
									J 3.	05/07/1996	160		
2. Principal F	Place of Busin	ness	20.	Mailing Address					4.	FEI Number		114	pplied For
21				26					"	59-3377075		<b> </b>	lot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					╁	00 0011010			Additional
22				27					5.	Certificate of Status Desired	ı 🗆		Required
City & State				City & State					6.	Election Campaign Financi	30	<del></del>	) May Be
23			28	28						Trust Fund Contribution	" 🗆		to Fees
Zip .		Country		<b>Z</b> ip		Country	,		8.	This corporation owes or ha	as paid the cu	rrent year Ir	ntangible
24		25	29		30					Personal Property Tax due	June 30.	Yes	□Ño
		and Address of Curre	nt Regis	itered Agent					10.	Name and Address of Ne	w Registered	Agent	
	L CORP.	_				81	Nε	ame					
200 LAURA ST.							St	reet Addres	ss (P.	O. Box Number is Not Acce	eptable)		
J.	ACKSONVIL	LE FL 32202							(				
						63							
						84	Ci	hv				<b>85</b> Zip	Code
						-		•		•	FL	1 ' '	
11. Pursuant	to the provis	ions of Sections 607.050	02 and 6	07.1508, Florida Statu	tes, the	above	e-nai	med corpo	ration	n submits this statement for loard of directors. I hereby a	the purpose o	fchanging	its registered
agent. I a	ım familiar w	th, and accept the oblig	ations of	f, Section 607.0505, FI	lorida S	itatutes	, 111 <del>0</del> S.	corporatio	n S D	oard of directors. I hereby a	ccept the app	oniment a	s registered
SIGNATURE													
L <u>.                                    </u>	Signature, typed	or printed name of registered age					ni ag	nature required			DATE		
12.	Т	OFFICERS AN	DOUBLE	DELETE	13			<del></del>	A	ADDITIONS/CHANGES TO C	FFICERS AND		
NAME	_	TT, KEVIN		C) VELETE		1 TITLE						☐ Change	Addition
		ENWICK ISLAND DR.				2 NAME							
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CiTV.ST. 7IP						LOUTY OF	710	1					[

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Floride 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 an attachment with an address.

SIGNATURE:

422198