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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B.《Mo成集》 🏄

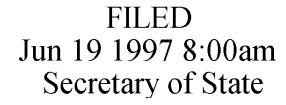
Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000066485 (9)

J & S PROPERTIES OF F.W.B., INC.

Р	rine	cioal	Pla	ce	of	Busi	ness

Mailing Address





34 WALTER MARTIN ROAD FORT WALTON BEACH FL 32549			34 WALTER MARTIN ROAD FORT WALTON BEACH FL 32548-4960										
							3. Date incorporated or Qualified 3a. Date 08/09/1996				of Last Report		
	lace of Business	2a. Mailing Address					4. FEI Number				plied For		
21			26									Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State			City & State					6. Election Campaign Financing \$5.00 May Be					
23			28					Trust Fund Contribution				may be o Fees	
Zip				Count	ry		8. This corporation has liability for	intangible	tax un	der s.	199.032,		
24	25 29 30						Florida Statutes Yes No						
		Address of Current	Registered A	gent		-1		10. Name and Address of New Re	gistered A	Agent			
	ERMANN, RICH				В	81 Name							
	NE WALTER MAI						Street Addre	treet Address (P.O. Box Number is Not Acceptable)					
FOR	RT WALTON BEA	ICH FL 32549			8	2							
						•							
•	•				8	4	City		FL	85	Zip C	odo	
11. Pursuant	to the provisions o	Sections 607 0502	and 607 1508	Florida Stati	ites. The abo		named corn	oration submits this statement for the p		chang	ino its	registered	
 office or r 	egi ste red agent, o	r both, in the State c	f Florida Such	richange was	authorized I	by t	the corporati	on's board of directors. I hereby acce	pt the app	ointme	nt as i	registered	
, •	itti i g irimat witti, an	o accept the obligat	ions or, acciro	11 007.0303, 7	ionoa statut	ÇS.							
SIGNATURE	Signature typed or printe	ed name of registered agent	and tile 4 applicab	se (NC	Of Fingistered A	 gerl	I signature terpure	ed when reinstating)	DAI£				
12.		OFFICERS AND	DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	CTOR	S IN 12	
TITLE	D	_		DELETE	1.1 THEF				•	☐ Cha	ange	☐ Addition	
NAME	PAPPAS, JEFF				1.2 NAM	E							
STREET ADDRESS	34 WALTER M				1.3 STRE	ET A	ODRESS						
CITY-ST-ZIP		N BEACH FL 325	19	T	1.4 CITY	_	- ZIP			·			
TITLE	D	OTELE		☐ DELETE	21 THE				,	Cha	ange		
NAME	PETERMANN,				22 NAM			EF Fra P. J	,				
STREET ADDRESS	POST OPPISE	N BEACH FL 885 -	ــما		2.3 STRE		ODRESS	8 SE FETY Road Walton Board F	· •,	~/	400	•	
CITY-ST-ZIP TITLE	PORT WALLO	N DEACH PL OFF		DELETE	2 4 City 3.1 Title		-ZiP	". Walter Bosch !	<u>`- `</u>	Chi	70	Addition	
NAME				otten	3.2 NAM						nige	L_J ROUNIUM	
STREET ADDRESS					3.2 NAME		nnuecc						
CITY-ST-ZIP					3 4. CITY								
TrTLE				DELETE	4.1 TiTLE					☐ Cha	nge	Addition	
NAME					4. 2 NAM	1E					-		
STREET ADDRESS					4.3 STRE	ET A	DORESS						
CITY-ST-ZIP					4.4 Cily	- 51 -	- ZIP						
TITLE				DELFTE	5.1 TITLE					Cha	inge	Addition	
NAME					5.2 NAMI	E							
STREET ADDRESS					5.3 STRE	E1 A	DORESS						
CITY-ST-ZIP					5.4 CITY	- 51	- 7(P						
TITLE				☐ DELETE	6.1 TITLE		.			Cha	nge	Addition	
NAME					6.2 NAMI	E							
STREET ADDRESS					6.3 STRE	£1.A	DORESS						
CITY-ST-ZIP					6.4 CITY	- S1 -	- 71P						

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 eath; 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.

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or on Ross

Valor (Aul of 17)