


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

FILED

May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mutham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000085749 1. Corporation Name <p style="text-align: center;">J W REMODELING, INC.</p>			
Principal Place of Business 1203 Quintuplet Court Casselberry, FL 32707		Mailing Address 1203 Quintuplet Court Casselberry, FL 32707	
2. Principal Place of Business 21 Suite Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 10/14/96		3a. Date of Last Report Applied For Not Applicable	
4. FEI Number 59-3407152		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent Jade C. Whitaker 1203 Quintuplet Court Casselberry, FL 32707		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 _____ DATE _____ <small>(Signature required for printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)</small>			
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE 1.1 TITLE P/S/T/D 1.2 NAME Jade C. Whitaker 1.3 STREET ADDRESS 1203 Quintuplet Court 1.4 CITY-ST-ZIP Casselberry, FL 32707		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
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 on Block 12 or Block 13 if changed, or on an attachment with an address.		1000021808 P1 -05/16/97--01014--025 ***165.00	
SIGNATURE: <u>Jade C. Whitaker</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____			

CR2E034 (9/96)