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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000096782 (3)

FILED Apr 17 1998 8:00am Secretary of State

JWM '	ventures, inc.							
Principal Place of Business Mailing Address						T TODALDER THE SALED BIRTH OBTHE EBRIT OBJECT DOBLED	10 000 0 1011 10001 1	
10317 WESTLEY WAY 10317 WESTLEY WAY								
ORLANDO FL 32525 ORLANDO FL 32525						DO NOT WRITE IN THI	S SPACE	
						3. Date Incorporated or Qualified		
						11/25/1996		
	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	A	pplied For
21		26				59-3416002	N	ot Applicable
Suite, Apt	. #, 9 1C.	Suite, Apt. #, etc.				Certificate of Status Desired		Additional
22 City & State		City & State	City & State				equired	
23		28	hamanan '			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Cou	entry		8. This corporation owes or has paid the control of the corporation owes or has paid the control of the corporation owes or has paid the corporation of the		
24	25	29	30	•		Personal Property Tax due June 30.		No
	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
	AS S EY, JOHN W III			81	Name			
	0317 WESTLEY WAY		82 Street A		Street Addres	ss (P.O. Box Number is Not Acceptable)		
0	RLANDO FL 32525			20				
			Ì	83				
				84	City	F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607 (0502 and 607 1508. Elorida St.	alutes the at	20)/8-	named coroor			te registered
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	Stgnature, typed or printed name of registered	agent and filir if applicable {	NOTE: Registered	d Ageni	t signature required	when reinstating) DATE		·
12.	· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D DELETE		1.1 100	1.1 TITLE			Change	Addition
NAME	MASSEY, JOHN W III		1.2 NAME					;
STREET ADDRESS	10317 WESTLEY WAY				(DDRESS			ļi
CITY-ST-ZIP TITLE	ORLANDO FL 32525	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		- ZIP		☐ Change	- Addition
NAME	MASSEY, JULIE W			2.1 HILE 2.2 NAME			Change	☐ Addition
STREET ADDRESS	10317 WESTLEY WAY		2.3 STREET ADDRESS		DORESS			1
CITY-ST-ZIP	ORLANDO FL 32525		2. 4 CITY- S1- ZIP					j
TITLE		☐ DELETE	3.1 TITLE		211		Change	Addition
NAME			3.2 NA	3.2 NAME			-	-
STREET ADDRESS			3.3 ST	REET A	DDRESS			
CITY-ST-ZIP			3.4. Cf		- ZIP			
TITLE		☐ DELETE	4 1 111				☐ Change	Addition
NAME			4 2 N/					
STREET ADDRESS					DDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CIT 5.1 TIT		ZIP		Change	☐ Addition
NAME			5.1 HI 5.2 NA				C. Onange	- Addition
STREET ADDRESS					DORESS			
CITY-ST-ZIP			5.4 CIT		,			
TITLE		DELETE	6.1 Til				Change	Addition
NAME			6.2 NA				•	
STREET ADDRESS			6.3 STF	REET A	DORESS			
CITY-ST-ZIP			6.4 CIT	Y-ST-	ZIP			
14. I hereby o	certify that the information supplied	with this filing does not qualif	y for the exe	mptic	on stated in Se	ection 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.

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