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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000098251 (7)

J. MILLS REALTY GROUP, INC.

Principal Place of	Business
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## **FILED** Feb 12 1997 8:00am Secretary of State



Principal Place of	rincipal Piace of Business Mailing Address					T testings the solid sixth debit denil sells sixte tertil filling seen such that				
1234 AIRPORT ROAD STE 125 DESTIN FL 32541		1234 AIRPORT ROAD STE 125 DESTIN FL 32541-2925								
,						Date Incorporated or Qualified     12/05/1996	3a, Date	e of Last R	eport	
Principal Place of Business     2a. Mailing Address					4. FEI Number	Applied For				
21		26	26			59-3416530		Not Applicable		
Suite, Apt. #, <b>€</b>	etc.	Suite 27	, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			& State			6. Election Campaign Financing		\$5.00	May Be	
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip		Cou	ntry	8. This corporation has liability for			. 199.032,	
24	25	29		30			Yes _			
	g. Name and Address of Cu	rrent Registered	Agent		81 Name	10. Name and Address of New Re	gistered A	pent	<del></del>	
	WOOD, JASON M				BT Naking	: :				
	CENIC HIGHWAY 98 EAST	8			82 Street A	Address (P.O. Box Number is Not Accepta	ole)	<del></del>	<del></del>	
Destin	FL 32541						·		<del></del>	
					83					
					84 City		······································	<b>85</b> Zip (	Code	
L							<u> </u>			
11, Pursuant to t	the provisions of Sections 607 istered agent, or both, in the S	.0502 and 607.150 Sate of Florida, Su	08, Florida Statut ich change was .	tes, the al	oove-named of by the corp	corporation submits this statement for the oration's board of directors. I hereby acce	ourpose of o	hanging it intment as	is registered registered	
agent. I am f	familiar with and accept the o	bligations of Sect	ion 607.0505, FI	orida Stat	utes.	oration to board of an obtolog. The lower account	prime appe		1081010100	
SIGNATURE										
	nature, typed or printed name of registers				d Agent signature	required when reinstating)	DATE			
12.	OFFICERS	AND DIRECTORS	DELETE	13,		ADDITIONS/CHANGES TO OFFI		Change	RS IN 12 Addition	
TITLE			L] DELETE	1	TLE ,	Taxan Undanwand		T change	FIII MODILION	
NAME				1.2 N/		Jason Underwood 98 2701 Scenic Hory. 98	E. 48	I		
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NAME				3.2 N						
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NAME				4, 2 N						
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NAME				6.2 N	AME					
STREET ADDRESS				6.3 \$	IREET ADORESS					
CITY+ST-ZIP				6.4 C	ITY-ST-ZIP					

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 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.