## 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

DOCUMENT # 1. Corporation Name P96000101213 (2)

GENERAL DEVELOPMENT, INC.

## **FILED** May 13 1998 8:00am Secretary of State



| Pr                   | incipal Place             | e of Business   | Mailing Address                                  |                 |                         | i rabitadi ing spain Batta Betal B   | 1111 <b>0310</b> 1 11 <b>6</b> 11 <b>0</b>    | 8461 11848 FIBST IT | DRE HILL IBB:  |
|----------------------|---------------------------|---|--|-----------------|-------------------------|--|---|---------------------|----------------|
|                      | 1822 ÇIRCLE<br>DRANGE PAR |   | 2822 CIRCLE RIDGE (<br>ORANGE PARK FL 32)        |                 |                         | DO NOT V   | /RITE IN THI                                  | S SPACE             |                |
|                      |                           |   |  |                 |                         | 3. Date Incorporated or Qual   |   | J OI ACE            |                |
|                      |                           |   |  |                 |                         | 12/13/1996   |   |                     |                |
| 2.                   | Principal Pi              | lace of Business  | 2a. Mailing Address                              |                 |                         | 4. Fet Number  |   | T TA                | pplied For     |
| 21                   |                           |   | 26   |                 |                         | 59-3413510   |   | <u> </u>            | lot Applicable |
|                      | Suite, Apt.               | #, etc.   | Suite, Apt. #, etc.                              |                 |                         | ]  | . 🗖   |                     | Additional     |
| 22                   |                           |   |  |                 |                         | <b>5.</b> Certificate of Status Desire   | 5. Certificate of Status Desired Fee Required |                     |                |
|                      | City & State              | 9   | City & State                                     |                 | •                       | 6. Election Campaign Finance   | ng  | \$5.00              | May Be         |
| 23                   |                           |   | 28   |                 | Trust Fund Contribution |  | •   | to Fees             |                |
|                      | Zip                       | Country   | Zip  | Cour            | ntry                    | 8. This corporation owes or h  | as paid the c                                 | urrent year in      | tangible       |
| 24                   |                           | 25  | 29   | 30              |                         | Personal Property Tax due  | Personal Property Tax due June 30. Yes No     |                     |                |
|                      |                           | 9. Name and Address of Cu                               | irrent Registered Agent                          |                 |                         | 10. Name and Address of Ne   | w Registere                                   | d Agent             |                |
|                      | WIL                       | Liams, James D  |  |                 | B1 Nam                  | ne   |   |                     |                |
| 2822 CIRCLE RIDGE DR |                           |   |  |                 |                         | Street Address (P.O. Box Number is Not Acceptable)   |   |                     |                |
| ORANGE PARK FL 32065 |                           |   |  |                 |                         | - Common (Common Common |   |                     |                |
|                      |                           |   |  |                 | B3                      |  |   |                     |                |
|                      |                           |   |  | F               | 84 City                 |  |   | las l Zia           | Code           |
|                      |                           |   |  |                 | City                    |  | F   | <b>L</b> 85 Zip     | C000           |
| SI(                  |                           | Signature typed or professorium of reputero<br>OFFICERS | stagent and the diappt cable (N<br>AND DIRECTORS | OTE: Registered | Agent signat            | ure required when reinstating)  ADDITIONS/CHANGES TO (   | DATE<br>OFFICERS AT                           | ND DIRECTOR         | RS IN 12       |
| TITE                 | LE                        | D   | DELE TE  | 1.1 101         | .E                      |  |   | Change              | Addition       |
| NA                   | ME                        | WILLIAMS, JAMES D                                       |  | 1.2 NA          | ΛE                      |  |   |                     |                |
| STREET ADDRESS       |                           | 2822 CIRCLE RIDGE DR                                    |  | 1.3 STHEET      |                         | s  |   |                     |                |
| CIT                  | Y-ST-ZiP                  | ORANGE PARK FL 32065                                    |  | 1.4 CIT         | Y-ST-ZIP                |  |   |                     |                |
| TITU                 | LE .                      | D   | DELETE   | 2.1 1111        | E                       |  |   | Change              | Addition       |
| NA                   | ME                        | WILLIAMS, JAMES B                                       |  | 2.2 NA          |                         |  |   |                     |                |
| STA                  | EET ADDRESS               | 2822 CIRCLE RIDGE DR                                    |  | 2.3 \$16        | EET ADDRESS             | orange Part, FC  | e Dr.   |                     |                |
| CIT                  | Y-\$T-ZIP                 | ORANGE PARK FL 32065                                    |  | 2.4 CII         | Y - ST - <i>Z</i> IP    | Orange Part FL   | 320   | 65                  |                |
| TETL                 | .E                        | D   | <b>⊠</b> DELETE                                  | 3.1 T(T)        | E                       | 7 7  |   | Change              | Addition       |
| NA                   | ME .                      | WILLIAMS, JOYCE A                                       |  | 3.2 NAM         | ΑE                      |  |   |                     |                |
| STR                  | EET ADORESS               | <b>2822 CIRCLE RIDGE DR</b>                             |  | 3.3 STR         | EET ADDRESS             | s I  |   |                     |                |
| CIT                  | Y-ST-ZIP                  | ORANGE PARK FL 32085                                    |  | 3.4. CIT        | Y-ST-ZIP                |  |   |                     |                |
| TITL                 | .E                        |   | ☐ DEL€ TE  | 4.1 TITU        | E                       |  |   | Change              | Addition       |
| NAN                  | Æ                         |   |  | 4.2 NA          | ME                      |  |   |                     |                |
| STR                  | EET ADDRESS               |   |  | 4.3 STR         | EFT ADDRESS             | s  |   |                     |                |
|                      | Y-ST-ZIP                  |   |  | 4.4 CiT         | (-S1-ZIP                |  |   |                     |                |
| TITL                 | E ]                       |   | DELETE   | 5 1 TITL        | F                       |  |   | Change              | Addition       |
| NAN                  | AE                        |   |  | 5.2 NAM         | 1E                      |  |   |                     |                |
| STR                  | EET ADDRESS               |   |  | 5.3 STR         | EFT ADDRESS             | s  |   |                     |                |
| ¢m                   | r-ST-ZIP                  |   |  | 5.4 CIT         | '-SI-ZIP                |  |   |                     | <u> </u>       |
| TITE                 | E                         |   | DELETE   | 6.1 TITL        | ŧ                       |  |   | Change              | ☐ Addition     |
| NAN                  | AE                        |   |  | 6.2 NAM         | 1E                      |  |   |                     |                |
| STA                  | EET ADDRESS               |   |  | 6.3 S1R         | eet address             | s  |   |                     |                |
|                      | (-ST-ZIP                  |   |  |                 | - <del>31-21</del> P    |  |   |                     |                |
| 14.                  | I hereby co               | ertify that the information supplie                     | ed with this filing does not qualify             | for the exer    | nption str              | ated in Section 119.07(3)(i), Florida Statu  | es. I further o                               | certify that the    | information    |

on report is true and accurate and that my signature shall have the same legal effect as it made under oath, that i am ar or trustee empowered by execute this report as recl<del>ains</del>d by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of the record Block 12 or Block 13 if changest, or on an attache