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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 06, 1999 8:00 am **Secretary of State**

05-06-1999 90195 017 \*\*\*150.00

## DOCUMENT # P96000103456

1. Corporation Name

JBC PROPERTY MAINTENANCE, INC.

Principal Place	of Business	Mailing Address					21111 001111 0			
P.O. BOX 220		P.O. BOX 220								
PALM HARBOR	FL 34682-0220	PALM HARBOR FL 34682-0220				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated of	or Qualifec	b		$\overline{}$
						12/20/1996				
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Apr	plied For
21		26				59-3417068			Not	Applicable
Suite, Apt. #	¥, etc.	Suite, Apt. #, etc.				5. Certificate of Status	Desired		\$8.75 A	II
		27				J. Commodic of Cicio			Fee Red	<del></del>
City & State		City & State				6. Election Campaign		<b>3</b> 🖂	\$5.00	
23		28				Trust Fund Contribi			Added to	) Fees
Zip	Country	Zip	Country			8. This corporation ow		rrent year In	itangible	DŽ]No
24	25	29 30	<u> </u>			Personal Property  10. Name and Addres		Pagisterer		
	9. Name and Address of Current	Registered Agent	81	Nam	ρ	IV. Name and Addres	S OI NEW	registered	Agom	
MARS	SHALL, JEFFREY S		["						<del> ,</del>	
	CITRUS VALLEY CIRCLE		82 Street Addres			ess (P.O. Box Number is I	Vot Accep	itable)		
	HARBOR FL 34683		83							
,,,,,,,			[50							
			84	City				FI	85 Zip C	ode
44 Durauant	to the provisions of Sections 607.0502	and 607 1508. Florida Statutes.	the abov	e-name	ed corpo	pration submits this staten	nent for th	a purnosa o	f changing its	registered
office or to	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familier with, and accept the obligati	f Florida. Such change was auth	onzea av	the co	rporatio	n's board of directors. I he	areby acce	ept the appo	intment as reg	jistered
agent. I ar	- [		a Diatutes	·.				4/2	15/55	
SIGNATURE	Signeture typed or printed name of registered agent	and title if applicable. (NOTE: Re-	gistered Age	nt signatu	pe required	when reinstating)		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANG				
TITLE	P	☐ DELETE	1.1 TITLE		P	EFFREY 5. N 156 MARING CLEARWATER	7245	hall	Change Change	☐ Addition
NAME	MARSHALL, JEFFREY S		1.2 NAME		5	EFFREY	<+			:
STREET ADDRESS	2229 CITRUS VALLEY CIRCLE		1.3 STREE	TAODRE	ss   1	156 MARINIS	Ä	227	1	
CITY-ST-ZIP	PALM HARBOR FL 34683		1.4 CITY-ST-ZIP			LIEARWATER	PI	337		Addition
TITLE		☐ DELETE	2.1 TITLE						Change	Audition
NAME		2.2								
STREET ADDRESS			2.3 STREET ADDRE		SS					
CITY-ST-ZIP		— Delett	2. 4 CITY-	ST-ZIP	+-				☐ Change	☐ Addition
TITLE		☐ DELĘTE	3.1 TITLE						C Strange	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS		55					
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	-	<u></u>			Change	☐ Addition
TITLE			4.2 NAME							
NAME	7.4 "		43 STREET ADD		ss					** *
STREET ADDRESS			4.4 CITY-ST-ZIP							ı
CITY-ST-ZIP		☐ DELETE	5.1 TITLE						Change	☐ Addition
NAME			5.2 NAME							•
STREET ADDRESS,			5.3 STREE	T ADDRE	ss					
CITY-ST-ZIP	See .		5.4 CITY-	ST-ZIP	-					
TITLE	r	☐ DELETE	6.1 TITLE						Change	☐ Addition
NAME	•		6.2 NAME				•			:
STREET ADDRESS		ļ	6.3 STREE	ET ADORE	SS					
OFFICE TO			6.4 CITY-1	ST-ZIP	1					

14. 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, with all other like empowered.

SIGNATURE:

G OFFICER OR DIRECTOR

(727) 516-0383