Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90109 046 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700008574

1. Corporation Name

JLR PROPERTIES, INC.

Principal Place	of Rusiness	Mailing Address		*	0111 90101 1018) 01111 1005 9101 HOT
Principal Place of Business 291 SOUTHHALL LANE		291 SOUTHHALL LANE			
MAITLAND FL 32751		MAITLAND FL 32751			30.07
				DO NOT WRITE IN THE	FIS SPACE
				3. Date Incorporated or Qualifed 01/2:1/1997	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Apr lied For
21		26		59-3422575	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A tditional
22		27			Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	Canada	-   28   -   -   -   -	Country	Trust f und Contribution	
Zip	Cour try	Zip	Country 30	<ol> <li>This corporation owes the current year Persor al Property Tax.</li> </ol>	r ntangible ☐ Yes I☐No
24	9. Name and Address of Current		30	10. Name and Address of New Register	
	5. Haine and Address or Server.	1 Negrotorea rige	81 Name		
ROB	INSON, RICHARD M			(D.O. D. M. Fas is Not Assessable)	
201 EAST PINE STREET		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
SUITE 1200			83		
ORL	ANDO FL 32801				7 7 7 r C edo
			84 City	F	EL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the above-named or	crooration submits this statement for the purpose	e of changing its registered
office c r r	egistered agent, or bo h, in the State on familiar with, and accept the obligat	of Florida. Such change was auf	thorized by the corpora	etion's board of cirectors. I hereby accept the ap	or ointment as reg siered
_	m familiar with, and accept the obligat	UNIS DI, GEORDIT DOT GOOD, 1	da Oldidico.		
SIGNATURE	Signature, typed or printed na ne of registered agen	nt and title if applicable. (NOT i. f	Registered Agent signature req		
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P8	DELETE	1.1 TITLE	DT	☐ Change 🔼 Addition
NAME	HONSKA, MARK E		1.2 NAME	HOUSE, JEFFREY T MD	
STREET ADDRE 3S	291 SOUTHHALL LANE		1.3 STREET ADDRESS	291 SOUTHHALL LANE	
CITY-ST-ZIP_	MATTLAND FL 32794		1.4 CITY-ST-ZIP	MAITLAND, FL 32751	Change Addition
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DOBSON, CHRISTOPHER E		2.2 NAME		
STREET ADDRE 3S	291 SOUTHHALL LANE		1		
CITY-ST-ZIP	MAITLAND FL 32751		2.3 STREET ADDRESS		
TITLE			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
NAME	SBA	☐ DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	D	Change ☐ Addition
STREET ADDRE 3S	ARCARIO, THOMAS J	☐ DELETE	2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	<u>ס</u>	
	ARCARIO, THOMAS J 291 SOUTHHALL LANE	☐ DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	D	
CITY-ST-ZIP	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		Ç Change ☐ Addition
TITLE	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751	☐ DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	DS	
TITLE NAME	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751 TO FOLEY, B. OREG		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	DS ANGERT, KEVIN C MD	Ç Change ☐ Addition
TITLE NAME STREET ADDRESS	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751 T9 FOLEY, B. AREG 291 SOUTHHALL LANE		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	DS ANGERT, KEVIN C MD 291 SOUTHHALL LANE	Ç Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751 TO FOLEY, B. OREG 291 SOUTHHALL LANE MAITLAND FL 32751	<b>©</b> €ELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	DS ANGERT, KEVIN C MD	Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751 TB FOLEY, B. OREG 291 SOUTHHALL LANE MAITLAND FL 32751 D		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	DS ANGERT, KEVIN C MD 291 SOUTHHALL LANE	Ç Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ARCARIO, THOMAS J 291 SOUTHHALL LANE MAITLAND FL 32751 TO FOLEY, B. OREG 291 SOUTHHALL LANE MAITLAND FL 32751 D GALLO, JOSEPH A JR 291 SOUTHHALL LANE MAITLAND FL 32751 D	<b>©</b> €ELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	DS ANGERT, KEVIN C MD 291 SOUTHHALL LANE MAITLAND, FL 32751	Change ☐ Addition
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(407) 667-0505