PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000021544

J & P DEVELOPMENT, INC.

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90085 006 ***150.00



Principal Place of Business Mailing Address					1 (10)((0) (0) (0) (0) (0) (0)	Attt Afftil Antil Autim 1	1881 11881 81111	#1311 #1 47 1891
2796 44TH ST SW NAPLES FL 34116		2796 44TH ST SW NAPLES FL 34116		DO NOT	WRITE IN THIS	SPACE		
					3. Date incorporated or Qu 03/05/1997	alifed		
2. Principal Pla	ace of Business L	2a. Mailing Address	0.1	<u> </u>	4. FEI Number		Ap	plied For
z1=442 =	Patter Point Dr	26-442-Putters		ت شارات				t Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desi	red 🗆	\$8.75 A Fee Re	
City, & State 23 / VADLES , FL		City & State NAPLES, FL		Election Campaign Fina Trust Fund Contribution	ncing 🗆	\$5.00 May Be Added to Fees		
Zip 24 3410	3 Country Collics	zip 29 국내63 [30]	Country	ies	This corporation owes the Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of	New Registered	Agent	
14 11 10	0111/5 141450		81	Name				
2796	CHKE, JAMES 44TH ST SW		82	Street A	set Address (P.O. Box Number is Not Acceptable)			
NAPL	LES FL 34116		83					j
		•	84	City		FL	85 Zip (Code
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	Signature, typed or printed name of registered agent	MOTE: Dea	istared \$500	t nicenture for	quired when reinstating)	DATE		
12.	OFFICERS AND		13.	it signature (ex	ADDITIONS/CHANGES		ID DIRECTO	ORS IN 12
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STREET ADDRESS			1.3 STREET	ADDRESS				
CITY-ST-ZIP			1.4 CITY-S	T-ZIP				
TITLE			2.1 TITLE				Change	☐ Addition
NAME	T		2.2 NAME		442 Patter Point D Naples, FL 3410	۲.	,	
STREET ADDRESS	2796 44TH ST SW 235		2.3 STREET ADDRESS 44		442 Parties 1011110	7	• •	
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TITLE FI .	* 1258 % €5, °	☐ DELETE	6.1 TITLE				☐ Change	Addition
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STREET ADDRESS	GL COLLANS A		6.3 STREE	T ADDRESS				Ì
CITY-\$T-ZIP			6.4 CITY-S	T-ZIP				

14. I 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 of or an attachment with an address, with all other like empowered.

SIGNATURE:

Date