

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE,  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Aug 10 1998 8:00am  
Secretary of State

DOCUMENT # **P97000031304 (3)**

1. Corporation Name

**JOHN RIGBY MASONRY, INC.**



Principal Place of Business

**3964 COTTONWOOD LA  
JACKSONVILLE FL 32207**

Mailing Address

**3964 COTTONWOOD LA  
JACKSONVILLE FL 32207**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/01/1997**

4. FEI Number

**59-3435269**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

**21 3964 Cottonwood LA**

Suite, Apt. #, etc.

**22**

City & State

**23 Jacksonville, FL**

Zip

**24 32207**

Country

**25 U.S.A.**

2a. Mailing Address

**26 3964 Cottonwood LA**

Suite, Apt. #, etc.

**27**

City & State

**28 Jacksonville, FL**

Zip

**29 32207**

Country

**30 U.S.A.**

9. Name and Address of Current Registered Agent

**RIGBY, JOHN  
3964 COTTONWOOD LA  
JACKSONVILLE FL 32207**

10. Name and Address of New Registered Agent

**81 John Rigby  
82 3964 Cottonwood Lane  
83  
84 City Jacksonville FL 85 Zip Code 32207**

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**7/10/98**

12. OFFICERS AND DIRECTORS

TITLE **President** ☐ DELETE

NAME **John Rigby**

STREET ADDRESS **3964 Cottonwood Lane**

CITY-ST-ZIP **JACKSONVILLE, FL 32207**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☐ Change ☒ Addition

1.2 NAME **John Rigby**

1.3 STREET ADDRESS **3964 Cottonwood Lane**

1.4 CITY-ST-ZIP **JACKSONVILLE, FL 32207**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**100002612621**

**-08/11/98--01029--029**

**\*\*\*158.75**

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, or on an attachment with an address.

SIGNATURE

**7/10/98 (904) 789-8697**

CR2E034 (5/98)

**JOHN RIGBY MASONRY, INC.**

3964 COTTONWOOD LN  
JACKSONVILLE, FL 32207  
(904) 703-0883  
PAGER: (904) 739-8597

Pg 2

July 10, 1998

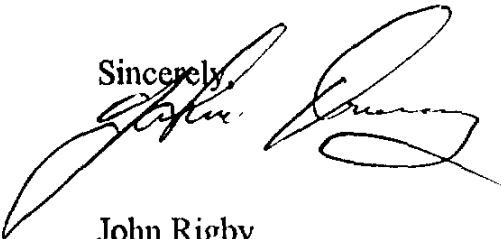
Florida Department of State  
Sandra B. Mortham  
Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

TO WHOM IT MAY CONCERN:

This letter is to inform you that I never recieved the 1st notice concerning my 1998 Profit Corporation Annual Report Packet. I recieved a 2nd notice and I contacted your department, they informed me to send a letter explaining what had happen and also send a check for \$158.75 for the filing fee.

Please accept this letter and the attached check to reinstate my corporation. Your help in this matter would be greatly appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read 'John Rigby', written over the word 'Sincerely,'.

John Rigby  
Owner