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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P97000032441 (2)

J & W ESTATES, INC.

Principal Place of Business Mailing Address 17018 DOLPHIN DRIVE 17018 DOLPHIN DRIVE NORTH REDINGTON BEACH FL 33708 NORTH REDINGTON BEACH FL 33708 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/09/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip ZID Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name SIMPSON, RONALD R 12586 SEMINOLE BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 33778** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 Stgonture, typod or printed name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change TOOKE, WALTER NAME 1.2 NAME 17018 DOLPHIN DRIVE STREET ADDRESS 1.3 STREET ADDRESS **NORTH REDINGTON BEACH FL 33708** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE \_\_\_ Addition 2.1 TITLE Change TITE F TOOKE, DEBORAH P 2.2 NAME NAME 17018 DOLPHIN DRIVE STREET ADDRESS 2.3 STREET ADDRESS **NORTH REDINGTON BEACH FL 33708** CITY - ST-ZIP 2 4 CiTY-ST-ZIP DELETE Change Addition 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

WALTER TookE

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

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 armual eport is true analysecurate 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 of the receiper or trestee 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. 98 813 804 3145

**FILED** 

Mar 12 1998 8:00am

Secretary of State