

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90008 028 ***150.00

DOCUMENT # **P97000059404**

1. Corporation Name

ON ITS WAY, INC.



Principal Place of Business

Mailing Address

6640 20TH STREET
VERO BEACH FL 32966

6640 20TH STREET
VERO BEACH FL 32966

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1997

4. FEI Number

65-0770846

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 the current year
Intangible Personal Property.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

2 City & State

27 City & State

3 Zip

Country

28 Zip

Country

4

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACKSON, J LEE
6640 20TH STREET
VERO BEACH FL 32966

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	JACKSON, COLEEN M	
STREET ADDRESS	5820 24TH STREET	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JACKSON, J. LEE	
STREET ADDRESS	5820 24TH STREET	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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, or on an attachment with an address.

SIGNATURE:

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/99

Date

Daytime Phone #

CR2E034 (5/99)

P97000059404
583042-90008-28

ON ITS WAY

"Serving Vero Beach since 1986"

7/2/99

FLA. DEPT. OF STATE
KATHERINE HARRIS
SECRETARY OF STATE
DIVISION OF CORPORATIONS


PLEASE ACCEPT MY APOLOGY AND THE ENCLOSED
PAYMENT FOR OUR 1999 PROFIT CORPORATION ANNUAL
REPORT FILING FEE.

HAVING NOT RECEIVED OUR REPORTING PACKET BEFORE
THE 2ND NOTICE, WHICH WE RECEIVED 7/1/99, WE
WERE NOT AWARE OF THE NEED TO FILE THIS REPORT.

AGAIN, I APOLOGIZE FOR THE DELAY.

THANK YOU IN ADVANCE FOR YOUR UNDERSTANDING
AND ASSISTANCE.

RESPECTFULLY.

 , V.P. ON ITS WAY, INC.

J. LEE JACKSON

Beachside - 4889 North A1A (Pelican Plaza) Vero Beach, FL 32963
West side - 6640 20th Street (Plantation Plaza) Vero Beach, FL 32966
Tel: (561) 567-9408 * Fax: (561) 562-8550