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Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90062 019 ***150.00

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000091496

1. Corporation Name
JAY-KOHL, INC.

Principal Place of Business

1228 E LIME ST
LAKELAND FL 33801
US

Mailing Address

1228 E LIME ST
LAKELAND FL 32801
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1997

2. Principal Place of Business

21 7109 Hileman Dr W

2a. Mailing Address

26 7109 Hileman Dr W

FEI Number

59-3473671

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Lakeland, FL

City & State

28 Lakeland, FL

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip Country

24 33809 25 U.S.A.

Zip Country

29 33809 30 U.S.A.

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

WOOD, JAY D
1015 REDBUD CIRCLE
PLANT CITY FL 33566

10. Name and Address of New Registered Agent

81 Name

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

7109 Hileman Drive West

83

84

Lakeland

FL

85 Zip Code

33809

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

JAY D. WOOD

1-27-99

Signature of person printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME WOOD, JAY D
STREET ADDRESS 1015 REDBUD CIRCLE
CITY-ST-ZIP PLANT CITY FL 33566

TITLE DV ☐ DELETE

NAME KOHLMAYER, JAY B RADLEY
STREET ADDRESS 1015 REDBUD CIRCLE
CITY-ST-ZIP PLANT CITY FL 33566

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

7109 Hileman Drive West
Lakeland, FL 33809

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

424 NANSEMOND AVE.
LAKE LAND, FL 33801

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

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, with all other like empowered.

SIGNATURE

JAY D. WOOD

1-27-99

941-816-1357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)