

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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000094440 (9)

1. Corporation Name

S & J TREE FARM AND NURSERY, INC.

Principal Place of Business

3766 SPRING PARK RD
JACKSONVILLE FL 32207

Mailing Address

3766 SPRING PARK RD
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/03/1997	
21	12250 Old St. Augustine Rd.	26		4. FEI Number 59-3475449	Applied For Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
23	City & State Jax FL	28	City & State	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
24	Zip 32258	25	Country USA	29	30
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
MCGEHEE, CHARLES J 3766 SPRING PARK RD JACKSONVILLE FL 32207			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	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME		1.2 NAME	President
STREET ADDRESS		1.3 STREET ADDRESS	James S. McGehee
CITY-ST-ZIP		1.4 CITY-ST-ZIP	3766 Spring Park Rd
TITLE	☐ DELETE	2.1 TITLE	Jax, FL 32207
NAME		2.2 NAME	1st President
STREET ADDRESS		2.3 STREET ADDRESS	Jason G. Duggan
CITY-ST-ZIP		2.4 CITY-ST-ZIP	2148 Felch Ave. Jax FL 32207
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME		3.2 NAME	Secretary
STREET ADDRESS		3.3 STREET ADDRESS	Charles S. McGehee
CITY-ST-ZIP		3.4 CITY-ST-ZIP	3766 Spring Park Rd
TITLE	☐ DELETE	4.1 TITLE	Jax, FL 32207
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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

Charles S. McGehee, Secretary

1-19-98

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