

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90095 022 \*\*\*150.00

DOCUMENT # P98000007226

1. Corporation Name  
J.C. ESTATE, INC.

Principal Place of Business  
4460 QUAIL ROOST DRIVE  
ST. CLOUD FL 34770

Mailing Address  
4460 QUAIL ROOST DRIVE  
ST. CLOUD FL 34770



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1998

4. FEI Number

59-3491668

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 Tax.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 4640 QUAIL ROOST ROAD

27 4640 QUAIL ROOST ROAD

City & State

City & State

23 ST. CLOUD, FL

28 ST. CLOUD, FL

Zip

Country

24 34772

25 OSCEOLA

Zip

Country

29 34772

30 OSCEOLA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENRY, VIRGINIA C  
4460 QUAIL ROOST DRIVE  
ST. CLOUD FL 34770

81 Name

HENRY, VIRGINIA L.

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

4640 QUAIL ROOST ROAD

83

84 City

ST. CLOUD

FL

85 Zip Code

34772

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

Virginia L. Henry - PRES. (SAME, NO CHANGE)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME SMITH, MICHELLE  
STREET ADDRESS 3800 KISSIMEE PARK RD.  
CITY-ST-ZIP ST. CLOUD FL 34772-8117

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME HENRY, VIRGINIA C  
STREET ADDRESS 4460 QUAIL ROOST DRIVE  
CITY-ST-ZIP ST. CLOUD FL 34770

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME CARROLL, CHRISTINE  
STREET ADDRESS 847 HAWKSBILL ISLAND DR.  
CITY-ST-ZIP SATELLITE BEACH FL 32937

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME CARROLL, CHRISTINE  
STREET ADDRESS 847 HAWKSBILL ISLAND DR.  
CITY-ST-ZIP SATELLITE BEACH FL 32937

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

Virginia L. Henry

1/15/99

407-892-5225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)