

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000009271

TAYLORZONE VENTURES, INC.

FILED
Apr 29, 1999 8:00 am
Secretary of State
04-29-1999 90054 009 ***150 00



Principal Place of Business Mailing Address					1				
306-B CENTRE	STREET	306 B CENTRE STREET			į				
FERNANDINA BI	EACH FL 32034	FERNANDINA BEACH FL 52034			DO NOT WRITE IN THIS SPACE				
					3. Date Ir corporated or Qualife		JI AUL		
					1	J.			
					01/28/1998 4. FEI Number		I Ann	ied For	
2. Principa Pl	ace of Business	2a. Mailing Address	//	5d. L	59-349213	,			
21		26 301 S. McDonell Street		39"371213	<u> </u>		Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		. <b>\$8.75</b> A			
		27 / / / / / 8							
City & Sate		City & State		6. Election Campaign Financing	, D	\$5.00	, I		
23		20 - (47 - 0 1 / 0			Trust Fund Contribution		Added to	Fees	
Zip	Country	1 -	Country		8. This corporation owes the co	rrent year Int	/	, , , , , , , , , , , , , , , , , , ,	
24	25	29 28204 30	u	<u> 5 PY</u> _	Personal Property Tax.		<u> </u>	□No	
	9. Name and Address of Current	Registered Agent		т	10. Name and Address of New	Registered	Agent		
****			81	Name					
TOUSEY, CLAY B JR.			82	Street Addre	ess (P.O. Box Number is Not Accep	itable)		-	
	DEPENDENT DRIVE STE. 2600					·			
JACK	(SONVILLE FL 32202			1	,				
			84	City			85 Zip C	ode	
						FL			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statures, 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 cirectors. 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 na ne of registered agent			nt signature required	ADDITI(INS/CHANGES TO C		ID DIRECTO	S IN 12	
12.	OFFICERS AND		13.	<del></del>	ADDITIONS/CHANGES TO C	FFICERS AI	☐ Change	Addition	
TITLE	D	_					_ onunge		
NAME	ZONA, JOHN III		1.2 NAME						
STREET ADDRE 3S	306-B CENTRE STREET		1.3 STREE	TADDRESS				į	
CITY-ST-ZIP	FERNANDINA BEACH FL 32034		1.4 CITY-5	ST-ZIP			Change	Addition	
TITLE	D	☐ DELETE	2.1 TITLE				Change		
NAME.	PANOS, MIRIAM T		2.2 NAME						
STREET ADDRESS	306-B CENTRE STREET		2.3 STREE	TADDRESS					
CITY-ST-ZIP	FERNANDINA BEACH FL 32034		2 4 CITY-	ST-ZIP					
TITLE		☐ DELETE	3 1 TITLE				Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRE 3S		L.	3.3 STREE	T ADDRESS				ļ	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				İ	
TITLE			4.1 TITLE				☐ Change	Addition	
NAME	•		4. 2 NAME						
				T ADDRESS					
STREET ADDRE 3S				ļ				i	
C/TY-ST-ZIP		- DELETE	4.4 CITY-5	51-219			[] Change	Addition	
TITLE			5.1 TITLE		,		□ oumide		
NAME			5.2 NAME	TARRES				1	
STREET ADDRE 3S				TADDRESS					
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP					
TITLE		- Section	61 TITLE				Change	☐ Addition	
NAME			6.2 NAME						
STREET ADDRESS	1		6.3 STREE	T ADDRESS					
CITY PT 7/D			6.4 CITY-5	ST-ZIP				İ	

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 reade under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as recuired 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: \_ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR