

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000073716

1. Entity Name

LINTON JOG ASSOCIATES II, INC.



Principal Place of Business

4400 PGA BLVD.
SUITE 900
PALM BEACH GARDENS, FL 33410

Mailing Address

4400 PGA BLVD.
SUITE 900
PALM BEACH GARDENS, FL 33410



04192004 No Chg-P CR2E034 (10/03)

4. FEI Number

65-0859445

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CHERRY, RICHARD G
4400 PGA BLVD. SUITE 900
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WILMERING, N K
STREET ADDRESS PO BOX 2011
CITY, ST, ZIP WEST PALM BEACH, FL 33402

TITLE VD
NAME HOECKER, JOHN J
STREET ADDRESS 13090 COASTAL CIRCLE
CITY, ST, ZIP WEST PALM BEACH, FL 33410

TITLE TD
NAME HOECKER, GARY
STREET ADDRESS 214 S GRAND AVE W
CITY, ST, ZIP SPRINGFIELD, IL 62704

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

000000133866
04/27/04-80104-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard G. Cherry, Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/04

561 471-7767