## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

S03422 DOCUMENT #
1. Corporation Name

(0)

WILLIE MAY JEFFRIES, P.A.

Principal Place of Business	Mailing Address
180 S BROADWAY BARTOW FL 33830	180 S BROADWAY BARTOW FL 33830



2. Principal Place of Business   2. Motivary Address   2. Motivary Address   2. First Number   2. Fi	180 S BROADWAY BARTOW FL 33830		180 \$ BROADWAY BARTOW FL 33830				
Suite, Apr. #, etc.						3. Date Incorporated or Qualified 09/27/1990	3a. Date of Last Report 08/09/1995
Suite Apt #, etc.   Suit	2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite Apt #, etc.   Suit	21		26			59-3033288	Not Applicable
The Property of Section		#, etc.	Suite, Apt #, etc.			5 Cortificate of Status Desired	\$8.75 Additional
22	22		27			3. Certificate of Status Desired	Fee Required
28			City & State				<b>\$5.00</b> May Be
28			·				Added to Fees
1. Name and Address of Current Registered Agent   1. Name and Address of New Registered Agent   1. Name and Address   1. Name and Address   1. Name and New Registered Agent   1. Name and Address   1. Name and New Registered Agent		· · · · · · · · · · · · · · · · · · ·	h	<u> </u>	1		
JEFFRIES, WILLIE MAY 180 S BROADWAY BARTOW FL 33830  82 Street Address (P.O. Box Number is Not Acceptable)  83    84 City FL 85 Zor Cox  84 City FL 85 Zor Cox  85 Street Address (P.O. Box Number is Not Acceptable)  85    86 Signature   Sections of Sections 697.0502 and 807.1508 Florids Statutes the above named corporation submits this statement for the purpose of champing lits register or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Hondby accept the appointment as registered agent and accept the obligations of, Section 607.0505. Florids Statutes  SIGNATURE    D	24			30			
SEPTINES   WILLIE MAY   180 S BROADWAY   882   Street Address (P.O. Box Number is Not Acceptable)	<u> </u>	9. Name and Address of Curr	ent Hegistered Agent		L Name	10. Name and Address of New H	legistered Agent
180 S BROADWAY BARTOW FL 38830	IECEDIE	C WILLE MAY		01	Name		
BARTOW FL 33830  84 Oily FL 85 Zer Coor registered agent, or both, in the State of Fonds Statutes, the above named corporation submits this statement for the purpose of changing its register or registered agent, or both, in the State of Fonds Such Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent familiar with, and accept the obligations of Sociolo 607 0505, Fioride Statutes.  SIGNATURE  Supports provide protections to improve agent entitle, registered agent agent and registered agent age		-•		82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)
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 register of agent, or both, in the State of Pointa Submit of Notice Ory Move authorized by the above named corporation submits this statement for the purpose of changing its register of agent with an accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Signature bread or the obligations of, Section 607 0505, Florida Statutes.  Bayer of the obligations of, Section 607 0505, Florida Statutes.  Bayer of the obligations of, Section 607 0505, Florida Statutes.  Bayer of the obligations of the o				92			
The provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its register 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 familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE    The properties of the purpose of control of the State of Florida Statutes.	DARION	1 I L 33030		63			
THE PUBLISHED TO PROVIDE AND DIRECTORS  INC.  OFFICERS AND DIRECTORS  INC.  DEETE 2 1 THE CHARGE  STREET ADDRESS  CHY-ST-ZPP  THE DIRECTORSS  CHY-ST-ZPP  THE DIRECTORSS  CHY-ST-ZPP  DELETE 3 THE STREET ADDRESS  CHY-ST-ZPP  DELETE 3 THE CHARGE  STREET ADDRESS  CHY-ST-ZPP  DELETE 5 THE CHARGE  STREET ADDRESS  CHY-ST-ZPP  STREET ADDRESS  CHY-ST-ZPP  STREET ADDRESS  CHY-ST-ZPP  STREET ADDRESS  CHY-ST-ZPP				84	City		85 Zip Code
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 familiar with, and accept the obligations of, Section 607 9005, Florida Statutes.  SIGNATURE    12.	44.5		00	-1 1 1 1			, ,
Support typed or protection and prospectical part is a facilitation of POECERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OF HICERS AND DIRECTORS of PNAME   JEFFRIES, WILLIE MAY   12 NAME   12 NAME   13 SIREFT ANDRESS   NAME	or registere	ed agent, or both, in the State of Fid	orida. Such change was auth	iorized by the corp	oration's boar	rd of directors. Thereby accept the appr	ointment as registered agent. I am
12.	SIGNATURE _			TATOTOTO CONTINUE	Level I and the second	dution and the constant	FATC
TITLE		· · · · · · · · · · · · · · · · · · ·			· · s Jul S o · sopue		
NAME   STREET ADDRESS					T		
180 S BROADWAY BARTOW FL		JEFFRIES, WILLIE MAY		1.2 NAME			
TITLE	i	180 S BROADWAY			T ADDRESS		
TITLE		BARTOW FL					
NAME			DELETE				Change Addition
STREET ADDRESS   23 STREET ADDRESS   24 CRY-ST-ZIP	NAME		_	22 NAME			
CITY-ST-ZIP				23 STREE	T ADDRESS		
TITLE				24 Cr1Y -	ST-ZIP		
STREEL ADDRESS   33 STREEL ADDRESS   34 CITY - ST - ZIP			☐ DELETE	3 1 THTLF			Change Addition
CITY-ST-ZIP	NAME			3.2 NAME			
TITLE	STREET ADDRESS			3.3 STHEE	T ADDRESS		
NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  5 1 TITLE  NAME  52 NAME  53 STREET ADDRESS CITY-ST-ZIP  54 CITY-ST-ZIP  54 CITY-ST-ZIP  TITLE  DELETE  6 1 TITLE  DELETE  6 1 TITLE  NAME  6 2 NAME	CITY-ST-ZIP			3.4 CITY-	ST-ZIP		
STREET ADDRESS	TITLE		☐ DELETE	4 1 DTLE			☐ Change ☐ Addition
CITY-ST-ZIP	NAME			4.2 NAME			
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NAME         52 NAME           STREET ADDRESS         53 STREET ADDRESS           CITY-ST-7IP         54 CITY-ST-7IP           TITLE         □ DELETE         6 I TITLE           NAME         62 NAME	CITY-ST-ZIP			4.4 CITY -	ST-ZIP		
STREET ADDRESS	TITLE		Delete	5 1 TITLE			Change Addition
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NAME 6 2 NAME	CITY+ST-ZIP		·	5.4 CITY -	ST - ZIP		
	TITLE		☐ DELETE	6 1 THLE	T		Change Addition
COCTANDATOS	NAME			6.2 NAME			
aincti wuntea	STREET ADDRESS			6.3 STREE	LADORESS		
CITY-SI-ZIP 64 CITY-SI-ZIP	CITY-ST-ZIP			6 4 CiTy -	ST-ZiP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: