OND NUT :: CO JRACIUN WILL BE L OLV JUN OR AFTER AUGUST 7. 1 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT ' FLORIDA DEPARTMENT OF STATE FILED CORPURATION Sandra B. Mortham ANNUAL REPORT 97 FEB -3 AM 9:11 Secretary of State 1996 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # S13933 (4) J.E. TINDELL COMPANY, INC. Principal Place of Business Mailing Address 2246 NW 40TH TERRACE 2246 NW 40TH TERR SUITE B SUITE B GAINESVILLE FL 32606 GAINESVILLE FL 32606 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3041748 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes 😿 No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SALZMAN, ANTHONY J. Peter Peter A. Robertson & Assoc Street Address (P.O. Box Number is Not Acceptable) 220 N. Main St. #A % MOODY & SALZMAN, P.A. 500 E UNIVERSITY AVENUE SUITE A 83 GAINESVILLE FL 32602-2759 84 City Zip Code 32601 Gainesville ons 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered in the State of Elorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the obligation of Socion 607.0505, Florida Statutes. 11. Pursuant to the provisings of Se office or registered agent. I am familiar $o \mu
u$ SIGNATURE equired when reinstating) Stonature, typed or I 12. S AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ĎΡ DELETE 1.1 TITLE Change Addition TITLE TINDELL, JOHN E. NAME 1.2 NAME 2246 NW 40TH TERR, SUITE B STREET ADORESS 1.3 STREET ADDRESS GAINESVILLE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP TITLE DŜT DELETE 2.1 TITLE Change ____ Addition TINDELL, LESLI S. NAME 22 NAME 2246 NW 40TH TERR, SUITE B STREET ADDRESS 23 STREET ADDRESS GAINESVILLE FL CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE ---TITLE NAME 32 NAME 33 STREET ADDRESS STREET ADDRESS 3.4. C(TY - ST - ZIP CITY-ST-ZIE DELETE Change Addition 4.1 TITLE TITLE 200002076962---02/05/97--01072--009 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS ****375.00 ****375.00 CITY-ST-7P 44 CITY - ST - ZIP DELETE Change Addition 5 1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY - ST - 7IP CITY - ST - ZIP th this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I say the post or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if If the constant the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and further certify that the information are called on this made under oath; that I am an online or director of that my name appears in Block 12 ck 13 if changed, or chment with an address Jan 6 1997 SIGNATURE: OR DIRECTOR onn e tinde

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