FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 9:30

DOCUMENT # **S26978** **(4)**

1. Corporation Name
JESACO, INC.

Principal Place of Business	Mailing Address
106 SOUTH SIXTH STREET DADE CITY FL 33525 US	P.O. DRAWER 1047 DADE CITY FL 33526-1047

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/24/1991
3a. Date of Last Report: 02/01/1994

2. Principal Place of Business — 21: 14150 - 6th Street
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23: Same
City & State — 28:
Zip — 24: Same
Country — 25: Same
Zip — 29:
Country — 30:

4. FEI Number: 59-3049014 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CLARK, ELIZABETH J
106 S 6TH ST
DADE CITY FL 33525

10. Name and Address of New Registered Agent

81 Name: Same
82 Street Address (P.O. Box Number is Not Acceptable): 14150 - 6th Street
83:
84 City: Same — FL — 85 Zip Code: Same

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: Elizabeth J. Clark — Elizabeth J. Clark — January 11, 1995
Signature, typed or printed name of registered agent and title if applicable — NOTE: If registered agent is an artificial entity, an officer must sign — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	PD	11 TITLE	Same	☒ Change ☐ Addition
12 NAME	CLARK, ELIZABETH J	12 NAME	Same	
13 STREET ADDRESS	106 S. SIXTH STREET	13 STREET ADDRESS	14150 - 6th Street	
14 CITY ST ZIP	DADE CITY FL	14 CITY ST ZIP	Same	
21 TITLE	VD	21 TITLE	Same	☒ Change ☐ Addition
22 NAME	WILLIAMS,JEANETTE	22 NAME	Same	
23 STREET ADDRESS	3211 BELLAMY BROTHERS BD	23 STREET ADDRESS	14621 Bellamy Brothers Boulevard	
24 CITY ST ZIP	DADE CITY FL	24 CITY ST ZIP	Same	
31 TITLE	STD	31 TITLE	Same	☒ Change ☐ Addition
32 NAME	MERCER, SANDRA	32 NAME	Same	
33 STREET ADDRESS	MERCER ROAD	33 STREET ADDRESS	39410 Mercer Road	
34 CITY ST ZIP	LACOOCHEE FL	34 CITY ST ZIP	Same	
41 TITLE	VD	41 TITLE		☐ Change ☐ Addition
42 NAME	WILLIAMS, WENDELL W.	42 NAME		
43 STREET ADDRESS	4209 MILLER AVENUE	43 STREET ADDRESS		
44 CITY ST ZIP	TAMPA FL	44 CITY ST ZIP		
51 TITLE		51 TITLE		☐ Change ☐ Addition
52 NAME		52 NAME		
53 STREET ADDRESS		53 STREET ADDRESS		
54 CITY ST ZIP		54 CITY ST ZIP		
61 TITLE		61 TITLE		☐ Change ☐ Addition
62 NAME		62 NAME		
63 STREET ADDRESS		63 STREET ADDRESS		
64 CITY ST ZIP		64 CITY ST ZIP		

14. 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)(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.

SIGNATURE: Elizabeth J. Clark — Elizabeth J. Clark January 11, 1995 (904) 567-5658
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone Number

0280474 CP