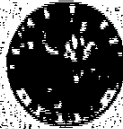


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S50348** (9)

1. Corporation Name

JEWELL'S SEWAGE SERVICE NORTH, INC.

APPROVED
AND
FILED

95 APR 19 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**811 MADRID ROAD
KEY LARGO FL 33037**

Mailing Address

**811 MADRID ROAD
KEY LARGO FL 33037**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/02/1991

3a. Date of Last Report

03/16/1994

4. FEL Number

65-0267367

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

23. City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

27

Zip

Country

9. Name and Address of Current Registered Agent

**BOWERS, VERA SUE
811 MADRID ROAD
KEY LARGO FL 33037**

10. Name and Address of New Registered Agent

81 Name

TIMOTHY NICHOLAS THOMES, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

99198 Overseas Highway Ste. # 8

83

84 City

KEY LARGO

FL

85 Zip Code

33037

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

Timothy N. Thomes

4/14/95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DVST
BOWERS, VERA SUE
811 MADRID ROAD
KEY LARGO FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DPCM
BOWERS, CLARENCE D.
811 MADRID ROAD
KEY LARGO FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

**DVST
Gerald Pinto
106150 Overseas Hwy
Key Largo, FL 33037**

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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)(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: X

Signature and typed or printed name of signing officer or director

Clarence D. Bowers

Date

**4/14/95
305-664-2255**