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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$69753

(9)

LEE'S SYSTEM OF JAX, INC. Principal Place of Business Mailing Address 6332 HYDE GROVE AVE. 6332 HYDE GROVE AVE. JACKSONVILLE FL 32210 JACKSONVILLE FL 32210-2834 3. Date Incorporated or Qualified 3a. Date of Last Report 07/29/1991 03/05/1996 2. Paridipal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3078337 21 26 Not Applicable Surc. Apt.# et-Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zio Country 20 Country This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes 🛣 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name FERRI, LEE B. 6332 HYDE GROVE AVE. 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 83 84 City Zip Code 85 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. Lam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. Stips of incluying the period traine of nightered agent and the diapplicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 HILE DPST □ DELETE 1.1 TITLE Change Ferri, Lee B. NAME 1.2 NAME 6332 HYDE GROVE AVE. STREET AFORESS 1.3 STREET ADDRESS JACKSONVILLE FL Offic ST 76 1.4 CITY - ST- ZIP DELETE THE 2.1 TITLE Change Addition NAME 2.2 NAME STEEL ALCORESS 2.3 STREET ADDRESS City S 2.4 CITY-ST-ZIP DELETE 100 3.1 TITLE Change Addition MAME 3.2 NAME STEEL CATORISE 3.3 STREET ADDRESS Off St ZP 34. CITY-ST-ZIP 1111 ☐ DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CTY St ZiP 4 4 City-SI-ZIP

6.4 DITY-ST-ZIP 14. If do hereby certify that the information supplied with this filing 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 office condition 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 charged, or on an attachment with an address.

5.1 THLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

1016

NAME

7016

MAM

STREET ACCESS 55

STREET ADJUGG 5

CHY ST AP

DELETE

DELETE

EURE B. FERRI 3/5/97

Change

Change

Addition

Addition

(96/6) CR2E034

FILED

Mar 12 1997 8:00am

Secretary of State