

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$275 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 AUG -9 PM 2:32

DOCUMENT # S71296

(5)

1. Corporation Name

JEM CAR, CO.

Principal Place of Business

3815 S NOVA RD
PT ORANGE FL 32127

Mailing Address

3815 S NOVA RD
PT ORANGE FL 32127

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/05/1991

3a. Date of Last Report

06/17/1994

4. FEI Number

59-3079537

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

7. This corporation has liability for intangible tax under c. 190.022,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 2578 Enterprise Rd

Suite, Apt. #, etc.

22 Orange City FL

City & State

23 32763

Zip

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

FOSTER, WALTER E. III
315 S PALMETTO
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME GAYTON, ERIC G.
STREET ADDRESS 3815 S NOVA RD
CITY - ST - ZIP PT ORANGE FL

TITLE DV
NAME GAYTON, STEPHEN J.
STREET ADDRESS 3815 S NOVA RD
CITY - ST - ZIP PT ORANGE FL

TITLE DST
NAME GAYTON, CAROL A.
STREET ADDRESS 3815 S NOVA RD
CITY - ST - ZIP PT ORANGE FL

TITLE D
NAME GAYTON, STEPHEN J.
STREET ADDRESS 3815 S NOVA RD
CITY - ST - ZIP PT ORANGE FL

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

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

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 110.07(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 checked, or in an addition with an address.

SIGNATURE:

Eric G. Gayton

ERIC G. GAYTON

7/31/95

904 775-7552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (3/95)