

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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



DOCUMENT # S73473

1. Corporation Name
C & J HOLDING COMPANY OF JACKSONVILLE, INC.

Principal Place of Business

US 301 South
Starke FL 32092

Mailing Address

PO Box 1208
Starke FL 32091

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8-14-1992

4. FEI Number

59-3087271

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes ☐ No

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

2. Principal Place of Officers

21.

Suite, Apt. #, etc.

22.

City & State

23.

Zip

County

24.

9. Name and Address of Current Registered Agent

JOHN S. WINKLER
2515 Oak Street
Jacksonville, FL 32204

2a. Mailing Address

26.

Suite, Apt. #, etc.

27.

City & State

28.

Zip

Country

29.

30.

11. Pursuant to the provisions of Sections 607.05(1) and 607.15(8), 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 607.05(5), Florida Statutes.

SIGNATURE

(Signature of Officer or Director)

(Signature of Registered Agent or New Registered Agent)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

12.

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

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STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

☐ Change

☐ Addition

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***150.00

14. I hereby certify that the information supplied on this form is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation and I am empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carloes Stalvey

4-28-98

CR2E034 (10/97)