

Amended #61.25

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**


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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC -3 PM 12:32

**DOCUMENT # S93637 (4)**

1. Corporation Name

**Jackson Engineering & Manufacturing, Inc.**

Principal Place of Business

**2023 Apex Court  
Apopka, FL 32703  
US**

Mailing Address

**2023 Apex Court  
Apopka, FL 32703  
US**

3. Date Incorporated or Qualified

**11/12/91**

3a. Date of Last Report

**8/25/97**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

**Andrea Ayers**

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

**1941 Grasmere Drive**

83

84 City

**Apopka**

**FL**

85 Zip Code  
**32703**

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

*Andrea Ayers*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE

NAME **Jackson, Dan T.**  
STREET ADDRESS **2023 Apex Court**  
CITY-ST-ZIP **Apopka, FL 32703**

TITLE **ST** ☒ DELETE

NAME **Jackson, Kirk L.**  
STREET ADDRESS **2023 Apex Court**  
CITY-ST-ZIP **Apopka, FL 32703**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☐ Change ☒ Addition

1.2 NAME **Ayers, Andrea**  
1.3 STREET ADDRESS **2023 Apex Court**  
1.4 CITY-ST-ZIP **Apopka, FL 32703**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP **400002364764-3**

3.1 TITLE **-12/05/97-01110-001**

3.2 NAME **\*\*\*\*\*61.25 \*\*\*\*\*61.25**

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 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:

*Andrea Ayers*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*12/2/97 407-886-0545*

CR2E034 (9/96)