

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

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**May 07 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V05167 (4)

1. Corporation Name
J&M ENTERPRISES OF NORTH FLORIDA, INC.



Principal Place of Business 105 JOY ROAD FT WALTON BEACH FL 32547-2011	Mailing Address 105 JOY ROAD FT WALTON BEACH FL 32547-2011
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3. Date Incorporated or Qualified 01/01/1992	3a. Date of Last Report 05/01/1996
4. FEI Number 59-3101647	Applied For Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
23. City & State	27. City & State
24. Zip	28. Zip
25. Country	29. Country
30. Country	

9. Name and Address of Current Registered Agent

**MCMANUS, MARGARET L.
105 JOY RD.
FT. WALTON BEACH FL 32547-2011**

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: *Margaret L. McManus* **Margaret L. McManus** **President & C.E.O.** DATE: **April 29, 1997**

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	MCMANUS, MARGARET L
STREET ADDRESS	105 JOY RD.
CITY - ST - ZIP	FT. WALTON BEACH FL 32547-2011
TITLE	V <input type="checkbox"/> DELETE
NAME	MCMANUS, JOHN
STREET ADDRESS	105 JOY ROAD
CITY - ST - ZIP	FT WALTON BEACH FL 32547-2011
TITLE	T <input type="checkbox"/> DELETE
NAME	HERRICK, ARLO A.
STREET ADDRESS	47 WARWICK DR
CITY - ST - ZIP	SHALIMAR FL 32579
TITLE	S <input type="checkbox"/> DELETE
NAME	HERRICK, KATHERINE S.
STREET ADDRESS	47 WARWICK DR
CITY - ST - ZIP	SHALIMAR FL 32579
TITLE	V <input type="checkbox"/> DELETE
NAME	MCMANUS, SHEAN P.
STREET ADDRESS	4837 14TH AVEUNE EAST
CITY - ST - ZIP	BRANDON FL
TITLE	V <input type="checkbox"/> DELETE
NAME	MCMANUS, LAURA H
STREET ADDRESS	4837 14TH AVENUE EAST
CITY - ST - ZIP	BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 included 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 **Margaret L. McManus** **President & C.E.O.**

SIGNATURE: *Margaret L. McManus* DATE: **4/28/97** DAYTIME PHONE: **904-863-3847**

CR2E034 (9/96)