

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **V08774** (4)

1. Corporation Name

**JVF CENTRAL, INC.**



Principal Place of Business

**OCEAN DRIVE AND SUNSET BLVD.  
SUMMERLAND KEY FL 33042**

Mailing Address

**P.O. BOX 420500  
SUMMERLAND KEY FL 33042-0500  
US**

3. Date Incorporated or Qualified  
**01/24/1992**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21 **1200 Ocean Drive**

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
**65-0315033**

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VURAL, EROL M. P.A.  
BARNETT BANK BUILDING  
SECOND FLOOR, MILE MARKER 25, US HIGHWAY 1  
SUMMERLAND KEY FL 33042**

81 Name  
**Joseph V. Fisher**

82 Street Address (P.O. Box Number is Not Acceptable)  
**1200 Ocean Drive**

84 City  
**Summerland Key**

85 Zip Code  
**FL 33042**

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 this 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

*Joseph V. Fisher*

**Joseph V. Fisher**

**4/25/96**

DATE

12. OFFICERS AND DIRECTORS

TITLE **PVD** ☐ DELETE  
NAME **FISHER, JOSEPH V.**  
STREET ADDRESS **OCEAN DRIVE AD SUNSET-**  
CITY-ST-ZIP **SUMMERLAND KEY FL**

TITLE **SD** ☐ DELETE  
NAME **FISHER, LAVERNE B.**  
STREET ADDRESS **OCEAN DRIVE AD SUNSET-**  
CITY-ST-ZIP **SUMMERLAND KEY FL**

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 ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS **1200 Ocean Drive**  
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS **1200 Ocean Drive**  
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 119.07(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 changed, or on an attachment with an address.

SIGNATURE:

*Joseph V. Fisher*

**Joseph V. Fisher 4/25/96**

**(305)745-1854**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

PHONE NUMBER

CR2E034 (12/95)