Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□No

☐ Yes

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

Suite, Apt. #, etc.

FIGATE, MARY

297 50TH STREET WEST **BRADENTON FL 34209**

City & State

23

24

Zip



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # V15184 1. Corporation Name

J R DIVERSIFIED INDUSTRIES, INC.

27

28

Suite, Apt. #, etc.

City & State

Zip

30 29 25 9. Name and Address of Current Registered Agent

Country

Apr 16, 1999 8:00 am Secretary of State 04-16-1999 90066 015 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

02/17/1992

65-0320974

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

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

4. FEI Number

·			l			
		84 City		FL 85	Zip Cod	de
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 OFFICEROR AND DIFFECTORS IN						2 (3) 40
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE	_	
TITLE	D DELETE	1.1 TITLE		☐ Cha	inge	☐ Addition
NAME	BONNESON, RICHARD L.	1.2 NAME				1
STREET ADDRESS	214 49TH STREET WEST :	1.3 STREET	T ADORE	ess ·		
CITY-ST-ZIP	BRADENTON FL 😓	1.4 CITY-S	T- ZIP			
TITLE	D DELETE	2.1 TITLE		☐ Cha	inge	Addition
NAME .	BONNENSON, JANE C.	2.2 NAME				ł
STREET ADDRESS	214 49TH STREET WEST	2.3 STREET	T ADDRE	ESS .		}
CITY-ST-ZIP	BRADENTON FL	2. 4 CITY-S	T-ZIP			
TITLE	. DELETE	3.1 TITLE		□ Cha	ınge	☐ Addition
NAME]		3.2 NAME				1
STREET ADDRESS		3.3 STREET	T ADDRE	ESS		
CFTY-ST-ZIP		3.4. CITY-S	T-ZIP			
TITLE	☐ DELETE	4,1 TITLE		□ Cử	inge	Addition
NAME		4. 2 NAME)
STREET ADDRESS		4.3 STREET	T ADDRE	=SS		
CITY-ST-ZIP		4.4 CITY+S	T-ZIP			
TITLE	☐ DELETE	5.1 TITLE		Ctri	ange	Addition
NAME		5.2 NAME		·	-	
STREET ADDRESS		5.3 STREE	TADORE	ESS		i
CITY-ST-ZIP		5.4 CITY-S	T-ZIP			
TITLE	☐ DELETE	6.1 TITLE		□ Chi	ınge	Addition
NAME .		6.2 NAME				ĺ
STREET ADDRESS		6.3 STREET	TADORE	ESS		
CITY-ST-ZIP		6.4 CITY-S	_			
14. I hereby o	ertify that the information supplied with this filing does not qualify for the	exempt	ion sta	ated in Section 119.07(3)(i), Florida Statutes. I further certify that	the info	rmation

Country

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Indicated on this annual report or supplied with this limit does not quality for the exemplor stated in Section 15.07 (5), in the composition of 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, with all other like empowered.

SIGNATURE: