FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V29114** **(8)**

1. Corporation Name
J. K. REGAL, INC.

Principal Place of Business	Mailing Address
401 60TH ST. W. BRADENTON FL 34209	401 60TH ST. W. BRADENTON FL 34209

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/10/1992**
3a. Date of Last Report: **01/25/1994**

2. Principal Place of Business
21 6404 MANATEE AVE. W.
22 Suite, Apt. #, etc. SUITE H.
23 City & State BRADENTON FL
24 Zip 34209
25 Country MANATEE

2a. Mailing Address
26 6404 MANATEE AVE. W.
27 Suite, Apt. #, etc. SUITE H.
28 City & State BRADENTON FL
29 Zip 34209
30 Country 1

4. FEI Number: **65-0325949** ☐ 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

RICARD, LEA J.
401 60TH ST. W
BRADENTON FL 34209

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 6404 MANATEE AVE. W.
83 SUITE H.
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PT	11 TITLE	xxx Change	☐ Addition
NAME	RICARD, LEA J	12 NAME		
STREET ADDRESS	4763 INDEPEDENCE DR.	13 STREET ADDRESS	5339 87th Street West	
CITY-ST-ZIP	BRADENTON FL 34210	14 CITY-ST-ZIP	Bradenton, FL 34210	
TITLE	VS	21 TITLE	☐ Change	☐ Addition
NAME	RICARD, RAYMOND	22 NAME		
STREET ADDRESS	4763 INDEPENDENCE DR.	23 STREET ADDRESS	5339 87th Street West	
CITY-ST-ZIP	BRADENTON FL	24 CITY-ST-ZIP	Bradenton, FL 34210	
TITLE		31 TITLE	xxx Change	☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE	☐ Change	☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE	☐ Change	☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE	☐ Change	☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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: Lea J. Ricard LEA J. RICARD 4/24/94 813 794-1086
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (Date) (Daytime Phone #)

0337000 CP