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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

1. Corporation Name

(1)

JACKSON & ASSOCIATES, GENERAL CONTRACTORS, INC.

FILED May 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							ilil vijii vibil i	TIBLE OF DEL CE	IN DIDIO IDDA	
8254 ÇOLAN I	PALCE	6254 COLAN PLACE								
SARASOTA FL	. 34240	SARASOTA FL 34240			DO NOT WRITE IN THIS SPACE					
US		US			3. Date Incorporated or Qualified					
						05/12/1992				
2. Principal Pk	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For		
21		26				65-0344174			ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	F-1			5. Certificate of Status Desired		.	Additional legulred	
City & State		City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has p	aid the curi	ent year In	itangible	
24	25	29	30			Personal Property Tax due Jun] No	
	9. Name and Address of Curren	t Registered Agent		B1	Name	10. Name and Address of New R	egistered A	gent		
	KSON, THOMAS A.		D1			3				
	4 COLAN PALCE		8			ess (P.O. Box Number is Not Accepta	ible)			
SA	RASOTA FL 34240		ł	83						
			ļ					11 70:	01-	
		\	- 1	84	City		FL	1 1 '	Code	
11. Pursuant t	o the provisions of Sections 607,050.	and 607.1508, Florida Statut	es, the ab	ove	-named corpo	oration submits this statement for the on's board of directors. I hereby acce	purpose of	changing	its registered	
ottice or re agent. I ar	egistered agent, or both, in the State in familiar with, and accord the obliga	ations of Section 607.0505, Fl	aumonzet orida Stati	utes.	me corporation	on's poard of directors. Thereby acce	Art the appa	JII III TOH L	a registered	
SIGNATURE	Than S					Jackson				
				Agen	it signature require	ad when reinstating) ADDITIONS/CHANGES TO OFF			BS IN 12	
12.			1.1 10	LE	I	Nobiliono, or winder to otto	OLITO / III	Change	Addition	
NAME	JACKSON, THOMAS		1.2 NA							
STREET ADDRESS	7610 S. LEEWYNN DR.		1.3 ST		ADDRESS					
CITY-ST-ZIP	SARASOTA FL 34240			ry-St	- 7IP		.,			
TITLE	V	☐ DELETE	2.1 10					Change	Addition	
NAME	JACKSON, NANCEE			2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	7610 S. LEEWYNN DR.				1					
CITY-ST-ZIP TITLE	SARASOTA FL 34240			2 4 CHY-ST-ZIP 3.1 TITLE				Change	Addition	
NAME		•	3.2 NA					•		
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	3.4.		3.4. C	TY-\$1	T - ŽIP					
TITLE		☐ DEL£1E	4.1 TII	LE				Change	Addition	
NAME			4. 2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE	4.4 CI		- ZIP			Change	Addition	
TITLE		L_J DELLIE	5.1 T(1 5.2 NA					onange	- Jaganiai)	
NAME STREET ADDRESS					ADDRESS	•				
CITY-ST-ZIP			5.4 Ci							
TITLE		DELETE	6.1 TH					☐ Change	☐ Addition	
NAME			6.2 N	ME						
STREET ADDRESS			6.3 \$1	REE1	ADDRESS					
CITY+ST-ZIP		50 at 2 (9)		TY-ST		Cooking 440 07(0)(1) Florida Character	I forther an	elific that the	n information	
I 14 Liberaby o	entity that the information supplied w	am this tiling does not quality f	or the exe	ımpt	ion stated in S	Section 119.07(3)(i), Florida Statutes.	Truitilet ce	тыу шаш	e inomation	

Indicated on this annual report or supplied with this ning does not quality for the exemption stated in section 1.19.07(3)(), Florida Statutes. Further Certify that no information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of this corporation or the register or trustice introvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an attrigring it with an adoless.

4/27/98