

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V37874 (7)

1. Corporation Name

JANZEN, JOHNSTON & ROCKWELL OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/21/1992

3a. Date of Last Report
03/03/1994

4. FEI Number
59-3125823

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

2. Principal Place of Business

2a. Mailing Address

21 4451 GLENCOE AVE
SUITE 260
MARINA DEL REY CA 90292
US

26 4451 GLENCOE AVE
SUITE 260
MARINA DEL REY CA 90292
US

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAPITAL CONNECTION, INC.
417 E VIRGINIA ST
SUITE 1
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when rotating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	JOHNSTON, BRIAN D
STREET ADDRESS	4551 GLENCOE SUITE 260
CITY- ST- ZIP	MARINA DEL REY CA
TITLE	EVS
NAME	STAUM, BARRY B
STREET ADDRESS	4551 GLENCOE #260
CITY- ST- ZIP	MARINA DEL REY CA
TITLE	SVI
NAME	BUCKLEY, EDWARD
STREET ADDRESS	4551 GLENCOE #260
CITY- ST- ZIP	MARINA DEL REY CA
TITLE	D
NAME	SCHEPPER, STEVE
STREET ADDRESS	4551 GLENCOE SUITE #260
CITY- ST- ZIP	MARINA DEL REY CA
TITLE	D
NAME	CLARK, ROLAND B
STREET ADDRESS	4551 GLENCOE SUITE 260
CITY- ST- ZIP	MARINA DEL REY CA
TITLE	D
NAME	BRASH, STEWART H
STREET ADDRESS	4551 GLENCOE SUITE 260
CITY- ST- ZIP	MARINA DEL REY CA

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
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 this 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:

B. B. Staum Secretary 3/9/95

(PRINT) NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Print Name)