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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V72617** (6)

1. Corporation Name

J. DUNLAP CO., INC.



Principal Place of Business

**6870 ARLINGTON EXP.
JACKSONVILLE FL 32211
US**

Mailing Address

**6870 ARLINGTON EXP.
JACKSONVILLE FL 32211
US**

2. Principal Place of Business

**21 9842 FAWN BROOK DRIVE
22 JACKSONVILLE, FL 32256**

City & State

23 Zip Country **USA**

24 25

2a. Mailing Address

**26 Suite, Apt. #, etc.
27 9842 FAWN BROOK DRIVE
28 JACKSONVILLE, FL 32256**

City & State

29 Zip Country **USA**

30

9. Name and Address of Current Registered Agent

**DUNLAP, JEANNE
6870 ARLINGTON EXP.
JACKSONVILLE FL 32211**

81 Name

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

**9842 FAWN BROOK DRIVE
JACKSONVILLE, FL 32256**

83 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 **Jeanne Dunlap**

Signature typed or printed name of registered agent and his or her title.

Jeanne Dunlap

3/31/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
☐ DELETE	D	DUNLAP, JEANNE	6870 ARLINGTON EXP JACKSONVILLE FL
☐ DELETE	PST	DUNLAP, JEANNE	6870 ARLINGTON EXP. JACKSONVILLE FL
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			
☐ DELETE			

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			

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: **Jeanne Dunlap**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/96 (904) 724-1935
Date Date of Filing

CR2E034 (12/95)