

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **637120** (7)

1. Corporation Name  
**THE WOOD STOVE, INC.**



Principal Place of Business Mailing Address  
**2031 NW 6 ST GAINESVILLE FL 32609** **2031 NW 6 ST GAINESVILLE FL 32609**

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country 30 Country

3. Date Incorporated or Qualified **09/24/1979** 3a. Date of Last Report **04/06/1995**  
4. FEI Number **59-1938338** 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  
**DUGGAN, MARION JEAN**  
**2031 NW 6 ST**  
**32609**

10. Name and Address of New Registered Agent  
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 officer 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 of the person named as registered agent and the applicable date. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY ST- ZIP  
PD **DUGGAN, M. JEAN (S)**  
**918 N.W. 40 DR.**  
**GAINESVILLE FL**  
TITLE NAME STREET ADDRESS CITY ST- ZIP  
T **DUGGAN, KERRY M.**  
**211 NW 33RD AVENUE**  
**GAINESVILLE FL**  
TITLE NAME STREET ADDRESS CITY ST- ZIP  
TITLE NAME STREET ADDRESS CITY ST- ZIP  
TITLE NAME STREET ADDRESS CITY ST- ZIP  
TITLE NAME STREET ADDRESS CITY ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1 1 TITLE 12 NAME  
13 STREET ADDRESS 14 CITY- ST- ZIP  
2 1 TITLE 22 NAME  
23 STREET ADDRESS 24 CITY- ST- ZIP  
3 1 TITLE 32 NAME  
33 STREET ADDRESS 34 CITY- ST- ZIP  
4 1 TITLE 42 NAME  
43 STREET ADDRESS 44 CITY- ST- ZIP  
5 1 TITLE 52 NAME  
53 STREET ADDRESS 54 CITY- ST- ZIP  
6 1 TITLE 62 NAME  
63 STREET ADDRESS 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)(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: *Jan Duggan Jean Duggan* 1/19/96 (352) 371-9535  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Distinguishing Phone #

CR2E034 (12/95)