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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Mar 11 1997 8:00am  
Secretary of State

DOCUMENT # 666035

(1)

1. Corporation Name

WEATHERMAKERS, INC.

Principal Place of Business

11281 43RD STREET N.  
CLEARWATER FL 34622

Mailing Address

11281 43RD STREET N.  
CLEARWATER FL 34622-4870

3. Date Incorporated or Qualified

04/01/1980

3a. Date of Last Report

03/26/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FABRIZI, RICHARD J  
11281 43RD ST N  
CLEARWATER FL 33520

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITILE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
FABRIZI, RICHARD J  
6001 51ST ST SO  
ST PETERSBURG, FL 00000

P ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DISALVATORE, ANGELO J.  
2789 VALENCIA LN., W.  
PALM HARBOR FL

VP ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MARCIANO, FRANKLIN A.  
840-49TH AVE., N.  
ST. PETERSBURG FL

☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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-03/12/97--01011--038  
\*\*\*165.00

14. I do hereby certify that the information supplied with this filing 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 I am not on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)