

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 JUN 26 AM 6:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G92375** (6)
1. Corporation Name
F & W FENCING, INC.



Principal Place of Business
**1410 ROOSEVELT BLVD
P.O. BOX 2414
KEY WEST FL 33045**

Mailing Address
**1410 ROOSEVELT BLVD
P.O. BOX 2414
KEY WEST FL 33045-2414**

2. Principal Place of Business
21 6620 Maloney Ave
Suite, Apt. #, etc.
22 Lot #7
City & State
23 Key West Fl
Zip
24 33040

2a. Mailing Address
26 6620 Maloney Ave
Suite, Apt. #, etc.
27 Lot #7
City & State
28 Key West, Fl
Zip
29 33040

25 **Monroe** 30 **Monroe**

3. Date Incorporated or Qualified
03/19/1984

3a. Date of Last Report
01/23/1996

4. FEI Number
59-1719698

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

**WARDLOW, WILLIAM
1410 ROOSEVELT BLVD
KEY WEST FL 33040**

10. Name and Address of New Registered Agent
81 Name Alan Collins
82 Street Address (P.O. Box Number is Not Acceptable) 6620 Maloney Ave, Lot #7
83
84 City Key West FL 85 Zip Code 33040

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]*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when certifying)

DATE

6/23/97

12. OFFICERS AND DIRECTORS

TITLE	DP	☒ DELETE
NAME	WARDLOW, WILLIAM	
STREET ADDRESS	1410 ROOSEVELT BLVD	
CITY-ST-ZIP	KEY WEST FL	
TITLE	V	☒ DELETE
NAME	ONERI, FLEITA JR.	
STREET ADDRESS	15 COLSON DRIVE	
CITY-ST-ZIP	SUMMERLAND, KEY, FL.	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ 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	D P Alan Collins
2.3 STREET ADDRESS	6620 Maloney Ave Lot #7
2.4 CITY-ST-ZIP	Key West, Fl 33040
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	200002227922-6
3.3 STREET ADDRESS	-07/01/97--01077--004
3.4 CITY-ST-ZIP	****165.00 ****165.00
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 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 changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

4/3/97

CR2E034 (9/96)