

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 108637

Entity Name: W.S. BADCOCK CORPORATION**Current Principal Place of Business:**200 NORTH PHOSPHATE BLVD
MULBERRY, FL 33860**Current Mailing Address:**TAX DEPT
P O BOX 497
MULBERRY, FL 33860**FEI Number:** 59-0152010**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAYT, PHILLIP
200 N PHOSPHATE BLVD
MULBERRY, FL 33860 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	EXECUTIVE VICE PRESIDENT, DIRECTOR
Name	BADCOCK, BEN M
Address	200 NORTH PHOSPHATE BLVD
City-State-Zip:	MULBERRY FL 33860

Title	EXECUTIVE VICE PRESIDENT, SECRETARY, DIRECTOR
Name	BADCOCK, HENRY C
Address	200 NORTH PHOSPHATE BLVD
City-State-Zip:	MULBERRY FL 33860

Title	CHAIRMAN, EXECUTIVE VICE PRESIDENT, DIRECTOR
Name	BADCOCK,III, WOGAN S
Address	200 NORTH PHOSPHATE BLVD
City-State-Zip:	MULBERRY FL 33860

Title	PRESIDENT, DIRECTOR
Name	PRICE, MICHAEL J
Address	200 NORTH PHOSPHATE BLVD
City-State-Zip:	MULBERRY FL 33860

Title	SENIOR VICE PRESIDENT, CHIEF FINANCIAL OFFICER
Name	BARGAMIN, STEPHEN N
Address	200 NORTH PHOSPHATE BLVD
City-State-Zip:	MULBERRY FL 33860

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN N BARGAMIN

SRVP/CFO

01/29/2014

Electronic Signature of Signing Officer/Director Detail_____
Date