

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G94383

**Entity Name:** WHARTON-SMITH, INC.

**Current Principal Place of Business:**

750 MONROE RD  
SANFORD, FL 32771

**Current Mailing Address:**

PO BOX 471028  
LAKE MONROE, FL 32747 US

**FEI Number:** 59-2392802

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

DAVOLI, RONALD F  
750 MONROE RD  
SANFORD, FL 32771 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 CD  
Name SMITH, GEORGE E  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title D, ASST. SECRETARY, EVP  
Name SMITH, TIMOTHY S  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title VPS  
Name LEWIS, DEVON A  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title PDT  
Name DAVOLI, RONALD F  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title DIV. MGR  
Name MARCELL , KENNETH E III  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title EVP  
Name HEWITT, PATRICK J  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title DIV. MGR.  
Name HARRIS, CECIL D  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title EVP  
Name CRAFTON, DARIN A  
Address 750 MONROE ROAD  
City-State-Zip: SANFORD FL 32771

**Continues on page 2**

*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:** DEVON LEWIS

**SECRETARY**

**01/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIV MANAGER  
Name O'DONNELL, TODD H  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title VP  
Name HAYES, DAVID V  
Address P.O. BOX 471028  
City-State-Zip: LAKE MONROE FL 32747

Title DIV. MGR  
Name WILLIAMS, GREGORY L  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771

Title AREA MANAGER  
Name IAROSI, THOMAS D  
Address 750 MONROE RD  
City-State-Zip: SANFORD FL 32771