

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000085690

Entity Name: WFW PROPERTIES, INC.**Current Principal Place of Business:**3400 COVE CAY DR., #1-D
CLEARWATER, FL 33760-1258**Current Mailing Address:**3400 COVE CAY DR., #1-D
CLEARWATER, FL 33760-1258 US**FEI Number:** 51-0351059**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THOMPSON, DORIS M
3400 COVE CAY DR., #1-D
CLEARWATER, FL 33760-1258 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:** DORIS M THOMPSON

01/11/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name THOMPSON, DORIS M
Address 3400 COVE CAY DR., #1-D
City-State-Zip: CLEARWATER FL 33760-1258

Title D
Name THOMPSON, DORIS M
Address 3400 COVE CAY DRIVE, #1-D
City-State-Zip: CLEARWATER FL 33760-1258

Title V.P.
Name THOMPSON, DORIS M
Address 3400 COVE CAY DRIVE, #1-D
City-State-Zip: CLEARWATER FL 33760-1258

Title TREASURE
Name THOMPSON, DORIS M
Address 3400 COVE CAY DR., #1-D
City-State-Zip: CLEARWATER FL 33760-1258

Title SECT
Name THOMPSON, DORIS M
Address 3400 COVE CAY DRIVE, #1-D
City-State-Zip: CLEARWATER FL 33760-1258

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: DORIS M THOMPSON

PRESIDENT

01/11/2017

Electronic Signature of Signing Officer/Director Detail

Date