

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **007904** (6)

1. Corporation Name

THE BAGGETT-WETHERBY COMPANY



Principal Place of Business

**736 S BEACH ST
PO BOX 2657
DAYTONA BEACH FL 32114-5443**

Mailing Address

**736 S BEACH ST
PO BOX 2657
DAYTONA BEACH FL 32114-5443**

3. Date Incorporated or Qualified
11/29/1916

3a. Date of Last Report
06/22/1995

4. FEI Number

59-0152173

Applied For

Not Applicable

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

2. Principal Place of Business

2a. Mailing Address

26 P.O. Box 2657

Suite, Apt. #, etc.

27

City & State

Daytona Beach FL

Zip

32115

29

Country

Volusia

30

City

31

State

FL

Zip Code

32

City

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State

34

City

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State

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City

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State

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City

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State

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City

41

State

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City

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State

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City

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State

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City

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State

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City

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State

9. Name and Address of Current Registered Agent

**BAGGETT, WILMANS B
736 S BEACH ST
DAYTONA BEACH FL**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

85. Zip Code

FL

32115

Daytona Beach

Volusia

32115

Daytona Beach

FL

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Daytona Beach

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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 (Block 12) if applicable

Block 12. Registered Agent signature required when filing

Date

12. OFFICERS AND DIRECTORS

TITLE **ST** ☐ DELETE
NAME **LEWIS, D**
STREET ADDRESS **229 S RIDGEWOOD AVE**
CITY-STATE-ZIP **DAYTONA BEACH, FL 00000**

TITLE **PD** ☐ DELETE
NAME **BAGGETT, WILMANS B**
STREET ADDRESS **736 S BEACH ST**
CITY-STATE-ZIP **DAYTONA BEACH, FL 00000**

TITLE **V** ☐ DELETE
NAME **BAGGETT, B**
STREET ADDRESS **736 S BEACH ST**
CITY-STATE-ZIP **DAYTONA BEACH, FL 00000**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-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-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or on an attachment to this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

904-255-3737

CR2E034 (12/95)