

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 108637

1. Corporation Name

W.S. BADCOCK CORPORATION

Principal Place of Business

200 NORTH PHOSPHATE BLVD  
P. O. BOX 497  
MULBERRY FL 33860

Mailing Address

200 NORTH PHOSPHATE BLVD  
P. O. BOX 497  
MULBERRY FL 33860

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MEYER, JAMES R.  
225 S. CENTRAL AVENUE  
BARTOW FL 33830

3. Date Incorporated or Qualified

03/10/1926

4. FEI Number

59-0152010

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

BADCOCK, BEN M.

STREET ADDRESS

2820 OAKLAND AVE

CITY-ST-ZIP

LAKELAND FL

TITLE

VP

☐ DELETE

NAME

BADCOCK, HENRY C

STREET ADDRESS

1976 VISTA VIEW

CITY-ST-ZIP

LAKELAND FL

TITLE

AS

☐ DELETE

NAME

BAGGETT, PATRICK C.

STREET ADDRESS

2242 PALMVIEW CIR W.

CITY-ST-ZIP

AUBURNDAL FL

TITLE

VSD

☐ DELETE

NAME

BADCOCK, WOGAN S., III

STREET ADDRESS

3529 CREWS LAKE DR.

CITY-ST-ZIP

LAKELAND FL

TITLE

VP

☐ DELETE

NAME

PRICE, MICHAEL J

STREET ADDRESS

2544 CREWS LAKE HILL LOOP N

CITY-ST-ZIP

LAKELAND FL 33813

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

C/V/D

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

V/D

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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

P/D  
marks, Donald C.  
1600 Country Trails Dr.  
Safety Harbour, FL 34695

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/4/99

(941) 425-4921

CR2E034 (1/1/98)