

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 9:50

DOCUMENT # 154101

(0)

1. Corporation Name

W.B. WOOD CO.

Principal Place of Business

94 EAST GARDEN STREET
P.O. BOX 409
PENSACOLA FL 32501

Mailing Address

94 EAST GARDEN STREET
P.O. BOX 409
PENSACOLA FL 32501

DO NOT WRITE IN THIS SPACE

2. Date Incorporated or Qualified

02/20/1948

3a. Date of Last Report

01/20/1994

4. FEI Number

59-0578118

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 § 199.002,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BECKMAN, KENNETH L
2410 TRONJO CIRCLE
PENSACOLA FL 32503

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 officer 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 607.0508, Florida Statutes.

SIGNATURE

Signature (print the printed name of registered agent and then sign it)

(if not the Registered Agent corporation, signed after consulting)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
PTD	BECKMAN, KENNETH L	2410 TRONJO CIRCLE	PENSACOLA, FL 00000
VSD	LOVORN, CHARLES T.	3328 PURCELL LANE	PENSACOLA FL

13. ADDITIONAL CHANGES TO OFFICER, AND DIRECTOR, IF ANY

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY ST ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY ST ZIP	☐	☐
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY ST ZIP	☐	☐
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY ST ZIP	☐	☐
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY ST ZIP	☐	☐
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY ST 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 199.002, Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or as an attachment with an address.

SIGNATURE:

Kenneth L Beckman
PRINT TYPE AND TYPED ON PRINTED NAME OF BOARD OFFICER OR DIRECTOR

KENNETH L BECKMAN

1-11-95 (904) 432-6177