

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
SUNSHINE POLYMER
Secretary of State
DIVISION OF CORPORATIONS

(4)

WALLACE FORD, INC.

LINTON BLVD & I 95
P O BOX 9002
DELRAY BEACH FL 33447-9002

LINTON BLVD & I 95
P O BOX 9002
DELRAY BEACH FL 33447-9002

21 I-95 & Linton Blvd.

2a. $\frac{1}{26} = \frac{1}{26} \times \frac{1}{1} = \frac{1}{26}$

22
23 Delray Beach, FL
24 33444 25 Palm Beach

27	County	
28	City	County
29	30	

9. Name and Address of Current Registered Agent

WALLACE, WILLIAM L
I-95 & LINTON BLVD.
DELRAY BCH. FL 33444

81	Name	
82	Street Address #1 (P.O. Box Number is Not Acceptable)	
83		
84	City	
		85 Zip Code

11. I warrant that the foregoing is a true and correct statement of the facts known to me, and that the above named corporation is about the statement for the purpose of changing its registered office as set forth herein, and that the State of Florida is a change agent authorized by the corporation to bind the corporation. The city accept the appointment as registered agent. I am hereby authorized to bind the corporation to the State of Florida to the above.

2000

$$f_0 = \frac{1}{\pi} \int_{-\infty}^{\infty} f(x) dx = \frac{1}{\pi} \int_{-\infty}^{\infty} \left(\frac{1}{x^2 + 1} \right) dx = \frac{1}{\pi} \cdot \pi = 1$$

12.18

12	AS WALLACE, KATHLEEN S LINTON BLVD & I 95 DELRAY BEACH FL PTD WALLACE, WILLIAM L LINTON BLVD & I 95 DELRAY BEACH FL VS SMITH, LEE LINTON BLVD & I-95 DELRAY BEACH, FL.	[] Death [] Death [] Death
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
1. NAME	☐ Change ☐ Addition
2. OFFICIAL TITLE	
3. ADDRESS	
4. PHONE	☐ Change ☐ Addition
5. E-MAIL ADDRESS	
6. DATE OF BIRTH	
7. GENDER	☐ Change ☐ Addition
8. RACE	
9. ETHNICITY	
10. SEXUAL ORIENTATION	
11. DATE OF DEATH	
12. DATE OF DEATH	☐ Change ☐ Addition
13. NAME	
14. OFFICIAL TITLE	
15. ADDRESS	
16. PHONE	☐ Change ☐ Addition
17. E-MAIL ADDRESS	
18. DATE OF BIRTH	
19. GENDER	☐ Change ☐ Addition
20. RACE	
21. ETHNICITY	
22. SEXUAL ORIENTATION	
23. DATE OF DEATH	
24. DATE OF DEATH	☐ Change ☐ Addition
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26. OFFICIAL TITLE	
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28. PHONE	☐ Change ☐ Addition
29. E-MAIL ADDRESS	
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31. GENDER	☐ Change ☐ Addition
32. RACE	
33. ETHNICITY	
34. SEXUAL ORIENTATION	
35. DATE OF DEATH	
36. DATE OF DEATH	☐ Change ☐ Addition
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39. ADDRESS	
40. PHONE	☐ Change ☐ Addition
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42. DATE OF BIRTH	
43. GENDER	☐ Change ☐ Addition
44. RACE	
45. ETHNICITY	
46. SEXUAL ORIENTATION	
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52. PHONE	☐ Change ☐ Addition
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78. DATE OF BIRTH	
79. GENDER	☐ Change ☐ Addition
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84. DATE OF DEATH	☐ Change ☐ Addition
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88. PHONE	☐ Change ☐ Addition
89. E-MAIL ADDRESS	
90. DATE OF BIRTH	
91. GENDER	☐ Change ☐ Addition
92. RACE	
93. ETHNICITY	
94. SEXUAL ORIENTATION	
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96. DATE OF DEATH	☐ Change ☐ Addition
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99. ADDRESS	
100. PHONE	☐ Change ☐ Addition
101. E-MAIL ADDRESS	
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103. GENDER	☐ Change ☐ Addition
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113. E-MAIL ADDRESS	
114. DATE OF BIRTH	
115. GENDER	☐ Change ☐ Addition
116. RACE	
117. ETHNICITY	
118. SEXUAL ORIENTATION	
119. DATE OF DEATH	
120. DATE OF DEATH	☐ Change ☐ Addition

[illegible]

SIGNATURE:

Lee Smith

1/23/96

407-278-0303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)