

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 238366 (9)
1. Corporation Name
THE WINTER HAVEN CORPORATION



Principal Place of Business
991 HILLSBORO BEACH
P.O. BOX 2795
POMPANO BCH. FL 33072-2795

Mailing Address
991 HILLSBORO BEACH
P.O. BOX 2795
POMPANO BCH. FL 33072-2795

3. Date Incorporated or Qualified 07/11/1960	3a. Date of Last Report 04/07/1995
4. FEI Number 59-6078844	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	
10. Name and Address of New Registered Agent	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent
HAASS, ROBERT O.
991 HILLSBORO BEACH
POMPANO BCH. FL 33062

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

11. Pursuant to the provisions of Sections 607.0601 and 607.1501, 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.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	PD	1. TITLE	☐ Change ☐ Addition
NAME	KLIBER, R. J.	2. NAME	
STREET ADDRESS	720 N. OXFORD RD.	3. STREET ADDRESS	
CITY-ST-ZIP	GROSSE P WOODS MI	4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	VD	5. TITLE	
NAME	ANGELL, PHILIP S.	6. NAME	
STREET ADDRESS	420 FORELANDS RD.	7. STREET ADDRESS	
CITY-ST-ZIP	ANNAPOLIS MD	8. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	STD	9. TITLE	
NAME	HAASS, STEPHEN A	10. NAME	
STREET ADDRESS	991 HILLSBORO BCH	11. STREET ADDRESS	
CITY-ST-ZIP	POMPANO BCH. FL	12. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	VD	13. TITLE	
NAME	BAUMAN, SUZANNE P.	14. NAME	
STREET ADDRESS	339 AUSTRALIAN AVENUE	15. STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	16. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	VD	17. TITLE	
NAME	COOPER, WILLIAM S.	18. NAME	
STREET ADDRESS	12927 GUACAMAYO CT.	19. STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	20. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		21. TITLE	
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY-ST-ZIP		24. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		25. TITLE	
NAME		26. NAME	
STREET ADDRESS		27. STREET ADDRESS	
CITY-ST-ZIP		28. CITY-ST-ZIP	☐ Change ☐ Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ralph J. Kliber, President

3/21/96
313-343-8860

CR2E034 (12/95)