

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

FILED

Apr 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

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



Principal Place of Business
3751 N.E. 27TH AVE
LIGHTHOUSE POINT FL 33064
US

Mailing Address
P.O. BOX 2795
POMPAHO BCH. FL 33072-2795
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 3751 N.E. 27th Ave.
Suite, Apt. #, etc.
22 City & State
23 Lighthouse Point, FL
Zip Country
24 33064 25 U.S.A.
26 P. O. Box 2795
Suite, Apt. #, etc.
27 City & State
28 Pompano Beach, FL
Zip Country
29 33072-2795 30 Broward

3. Date Incorporated or Qualified
07/11/1960
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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
HAASS, ROBERT O.
3751 N.E. 27TH AVE
LIGHTHOUSE POINT FL 33064

10. Name and Address of New Registered Agent
81 Name
STEPHEN A. HAASS
82 Street Address (P.O. Box Number is Not Acceptable)
3751 N.E. 27th Ave.
83
84 City
Lighthouse Point, FL
85 Zip Code
33064

11. Pursuant to the provisions of Sections 607.0102 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent to 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 Stephen A. Haass Secretary/Treasurer Apr 2, 1998

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLIBER, R. J.	1.2 NAME	
STREET ADDRESS	720 N. OXFORD RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	GROSSE P WOODS MI	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANGELL, PHILIP S.	2.2 NAME	
STREET ADDRESS	420 FORELANDS RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ANNAPOLIS MD	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAASS, STEPHEN A	3.2 NAME	
STREET ADDRESS	3751 N.E. 27TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE POINT FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUMAN, SUZANNE P.	4.2 NAME	
STREET ADDRESS	339 AUSTRALIAN AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOPER, WILLIAM S.	5.2 NAME	
STREET ADDRESS	12927 GUACAMAYO CT.	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 Robert O. Haass 3/2/98 313 343 8860

CR2E034 (10/97)