


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # 310340 1. Entity Name WAFH CORP. OF OKEECHOBEE	
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Principal Place of Business 1403 W AVE A. BELLE GLADE, FL 33430	Mailing Address 1403 W AVE A. BELLE GLADE, FL 33430
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DO NOT WRITE IN THIS SPACE



04172007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1151080	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOOKS, RUDOLPH SR.
1403 W. AVE. A
1500 W. CANAL STREET
BELLE GLADE, FL 33430

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOOKS, RUDOLPH SR. 1500 W. CANAL STREET BELLE GLADE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BARTON, LISA A 616 SE 9TH ST BELLE GLADE, FL 33430
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ACREE, MICKEY K. 5TH ST & RAILROAD AVE MOOREHAVEN FL,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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05/01/07-80118-019 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lisa Barton* Lisa Barton 4-18-07 561-996-7491