

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 336361

(1)

1. Corporation Name

WADSWORTH LAND COMPANY

Principal Place of Business

Mailing Address

EXECUTIVE OFFICE  
1 CORPORATE DRIVE  
PALM COAST FL 32151

EXECUTIVE OFFICE  
1 CORPORATE DRIVE  
PALM COAST FL 32151



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/11/1968

4. FEI Number

59-1228623

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

\$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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD  
GARDNER, JAMES E.  
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME AS  
VICTORIA P. GARD  
1.3 STREET ADDRESS 1 CORPORATE DR.  
1.4 CITY-ST-ZIP PALM COAST, FL 32151

TITLE ☐ DELETE

NAME VD  
BUTLER, SAMUEL JR.  
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME TD  
CALLEA, CHARLES J  
STREET ADDRESS 1 CORPORATE DR  
CITY-ST-ZIP PALM COAST FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME AS  
POWERS, RICHARD  
STREET ADDRESS 1330 AVE. OF THE AMERICA  
CITY-ST-ZIP NEW YORK NY

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME S  
CUFF, ROBERT G. (JR)  
STREET ADDRESS EXECUTIVE OFFICE, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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

4-21-99

(9/11/11) 4445-5700

CR2E034 (10/97)