

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Cynthia B. Whitman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

93 MAY -1 AM 5:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **343881** (9)

1. Corporation Name
WINGFIELD INC

Principal Place of Business

138 43RD AVE.
P.O. BOX 651
VERO BCH. FL 32961

Mailing Address

P.O. BOX 369
VERO BEACH FL 32961
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 04/02/1969	3a. Date of Last Report 02/07/1994
4. FEI Number 59-1294614	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. 190.012, Florida Statutes ☒ Yes ☐ No	

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	
WINGFIELD, A.S., JR.	
138 43RD AVE.	
VERO BCH. FL 32968	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

10. Name and Address of New Registered Agent	

11. Pursuant to the provisions of Sections 607.0902 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 607.0905, Florida Statutes.

SIGNATURE

Signature of Registered Agent (must be signed by agent)

Signature of Registered Agent (must be signed by agent)

1671

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
2. NAME	WINGFIELD, A.S., JR	1.2 NAME	
3. STREET ADDRESS	138 43RD AVE	1.3 STREET ADDRESS	
4. CITY, ST, ZIP	VERO BEACH FL	1.4 CITY, ST, ZIP	
5. TITLE		2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	
7. STREET ADDRESS		2.3 STREET ADDRESS	
8. CITY, ST, ZIP		2.4 CITY, ST, ZIP	
9. TITLE		3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY, ST, ZIP		3.4 CITY, ST, ZIP	
13. TITLE		4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY, ST, ZIP		4.4 CITY, ST, ZIP	
17. TITLE		5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY, ST, ZIP		5.4 CITY, ST, ZIP	
21. TITLE		6.1 TITLE	☐ Change ☐ Addition
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Sections 110.07(3)(b), Florida Statutes. I further certify that the information included 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. 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: W.S. Wingfield Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAL OR DIRECTOR

4-29-95 107-542-3232
Date Filing Number