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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 14 1997 8:00am

Secretary of State

3a. Date of Last Report

02/12/1006

3. Date Incorporated or Qualified

12/03/1073

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 441131

(0)

Mailing Address

10760 METRO PKWY..S.E.

FT. MYERS FL 33912-1107

WOLFER PRODUCE, INC.

Principal Place of Business

10760 METRO PKWY..S.E.

**SIGNATURE:** 

FT. MYERS FL 33912

						12/00/10/0	1 067	F1 1000		
2. Principal P	Place of Business	2a. Mailing Address				4. FEt Number 59-1550127			pplied For	
Suite, Apt.	ola #	Suite, Apt. #, etc.				09-1000127			ot Applicable	
22	π, οισ.	27				5. Certificate of Status Desired			Additional equired	
City & Stat	de	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for i	ntangible	lax under s	. 199.032,	
24	25	29	30					] No		
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered A	gent		
WILDON, SMOOT J.				81	Name					
7907 PAT BLVD.				82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)			
FT N	Myers, fl									
TAMPA FL 33815				83	33					
			•	84	City			land Zin	On 20	
				54	City		FL	<b>85</b> Zip	Code	
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	authorized	d bv	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	urpose of It the appo	changing i pintment as	ts registered registered	
OIGHAT OTIL.	Signature, typed or printed name of registered age	n' and title if applicable (NO	TE Registered	Agen	t signature required	d when reinstating)	DATE	* * * *	<del></del>	
12.	OFFICERS AND	DIRECTORS	13,			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	VD	☐ DELETE	1.1 [1]	TLE				Change	Addition	
NAME	WILSON, OLIN W		1.2 N/	ME						
STREET ADDRESS	10760 METRO PKWY., S.E.		1.3 ST	REET A	ADDRESS					
CITY-ST-ZIP	FT MYERS, FL 00000		1.4 C	TY-ST	- ZIP					
TITLE	PD	DELETE		2.1 TITLE				Change	Addition	
NAME	WILSON, SMOTT J		2.2 N/	ME						
STREET ADDRESS	7907 PAT BLVD		2.3 ST	REET #	ADDRESS				•	
CITY-ST-ZIP	TAMPA, FL 00000		2.4 C	ITY-SI	r-zip					
TITLE	STD	☐ DELETE	3.1 TI					Change	Addition	
NAME	SHERWOOD, ERNEST F.		3.2 N/	AME.						
STREET ADDRESS	10760 METRO PKWY SE		33 ST	REET A	ADDRESS					
CITY-ST-ZIP	FT MYERS FL			ITY-ST	·	•				
TITLE		☐ DELETE	4.1 TI		- En			Change	Addition	
NAME		<del></del>	4. 2 N							
STREET ADDRESS			1		ADORESS	•				
CITY-ST-ZIP										
TILE		DELETE	5.1 TI	TY-ST TIF	- <u>L</u> IF		<u> </u>	Change	Addition	
NAME			5.7 N					O outride	resolutili	
			1							
STREET ADDRESS					NOORESS					
CITY-ST-ZIP		DELETE		TV-ST	• ZIP			Change	Additio-	
TITLE		L) VELETE	6.1 TI					LJ Change	Addition	
NAME			6.2 N/							
STREET ADORESS			6.3 \$1	REET A	ADDRESS					
CITY-ST-ZIP		Justilia de la Cita de la companya d		TY-\$1		VI 6			<del> </del>	
informatic Lam an o	on indicated on this annual report or s	upplemental annual report is the receiver or trustee empor	true and a wered to e	accur	ate and that r	in Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	l effect as	it made un	ider oath: that	