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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 555911

1. Corporation Name

CITY-ST-ZIP

WORDS WORTH, INC.

	· · · · · · · · · · · · · · · · · · ·						
Principal Place of Business Mailing Address WORDS WORTH IN WORDS WORTH INC 27 MILL SITE LN 27 MILL SITE LN DOWLING PARK FL 32064 DOWLING PARK FL 3206		1			TE IN THIS SPACE	1011 8191/ 1891 200 - 1 200 - 1	
US		US			3. Date Incorporated or Qualifed 12/22/1977		***
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	App	olied For
Suite, Ar		26	· · · · · ·		59-1785385	Not	Applicable
22 Suite, A	n. #, Bic.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	□ \$8.75 A	
City & State City & State				 	Fee Rec	'	
23			6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip			Counti				rees
24	25 29		30 8. This corporation owes the current Personal Property Tax.			□No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R		
CA	RL STAUFFER	•	8	1 Name			
27	MILL SITE LN		8:	2 Street Addr	ress (P.O. Box Number is Not Accepta	hle)	
P O BOX 4375						terate a laborate parte manico	res Titas consi
DOWLING PARK FL 32064			83	3			
		*	84	4 City		85 Zip C	Militari III
141 District	40 4	MARKET A CONTRACTOR					
	t to the provisions of Sections 607.0502 registered agent, or both, in the State of				poration submits this statement for the	purpose of changing its r	egistered
- agont.	arrivarimal with, and accept the obligation	ons of, Section 607.0505, Flo	rida Statute	s.	on a sound of directors. Thereby accept	r me appointment as regi	stered
SIGNATURE		\$ ³⁵					
12.	Signature, typed or printed name of registered agent a OFFICERS AND			ent signature required	d when reinstating) 7.3	DATE	
TITLE	P	DELETE DELETE	13.		ADDITIONS/CHANGES TO OFF		
NAME	STAUFFER, CARL	C OCCUPIC	1.1 TITLE		गम् भाषा व्यक्त	☐ Change	☐ Addition
STREET ADDRESS 27 MILL SITE LN P O BOX 4375 N/A			1.2 NAME	T 4000000			
CITY-ST-ZIP	DOWLING PARK FL 32064	J INIT		TADDRESS			
TITLE	\$	☐ DELETE	1.4 CITY-5 2.1 TITLE	SI-ZIP			
NAME	STAUFFER, LOUISE B.		Z. / TITLE			П Свачан	T A A July
STREET ADDRESS						Change	Addition
CITY-ST-ZIP	DOWLING PARK FL 32064	/5 N/A	2.2 NAME	TADODECO	764	☐ Change	Addition
TITLE		'5 N/A	2.3 STREE	T ADDRESS	-	☐ Change	Addition
NAME:	The Atherses	5 N/A			-	- -	
STREET ADDRESS			2.3 STREE 2.4 CITY- 3.1 TITLE		-	☐ Change	☐ Addition
			2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP	-	- -	
CITY-ST-ZIP, 177.5	5.46.40 6.140.60 6.140.60		2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.3 STREE	ST-ZIP TADDRESS		- -	
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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, with all other like empowered.

6.4 CITY-ST-ZIP

FILED Feb 05, 1999 8:00am **Secretary of State**

02-05-1999 90013 046 ***150.00