

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

FILED

Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 626664

(7)

1. Corporation Name

WORTHINGTON SALES COMPANY

Principal Place of Business

3052 LAKESIDE DRIVE
P. O. BOX 6010
FERNANDINA BEACH FL 32034

Mailing Address

3052 LAKESIDE DRIVE
P. O. BOX 6010
FERNANDINA BEACH FL 32035-6010

2. Principal Place of Business

21 4252 JOHNS CEMETARY RD
State, Apt. #, etc.

2a. Mailing Address

P.O. BOX 1161
State, Apt. #, etc.

22 City & State

23 MIDDLEBURG FL

27 City & State

28 MIDDLEBURG FL

24 32068 Country

25 CLAY

29 32050 Country

30 CLAY

9. Name and Address of Current Registered Agent

WORTHINGTON, WALTER H.
2162 LAKESIDE DR
FERNANDINA BEACH FL 32034

3. Date Incorporated or Qualified

06/19/1979

3a. Date of Last Report

05/21/1996

4. FEI Number

59-1933134

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. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

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

(Signer must be the president or director of the corporation or its authorized agent)

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	WORTHINGTON, WALTER H.	
STREET ADDRESS	2162 LAKESIDE DR	
CITY - ST - ZIP	FERNANDINA BCH. FL	
TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	WORTHINGTON, HELEN I.	
STREET ADDRESS	2162 LAKESIDE DR	
CITY - ST - ZIP	FERNANDINA BCH. FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	WORTHINGTON, WALTER H	
STREET ADDRESS	4252 JOHNS CEMETARY RD	
CITY - ST - ZIP	MIDDLEBURG FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WORTHINGTON, DONALD	
STREET ADDRESS	4252 JOHNS CEMETARY RD	
CITY - ST - ZIP	MIDDLEBURG FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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: *Walter H Worthington*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER H WORTHINGTON

1-16-97 904 291 1829