

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 629117 (3)

1. Corporation Name

THE WOODLINE CORPORATION



Principal Place of Business

6923-A NORTH 9TH AVE.
PENSACOLA FL 32504

Mailing Address

6923-A NORTH 9TH AVE.
PENSACOLA FL 32504

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

VAUGHN, MARGARET P.
6336 ANTIETAM DRIVE
PENSACOLA FL 32503

3. Date Incorporated or Qualified

07/09/1979

3a. Date of Last Report

03/28/1995

4. FET Number

59-1930841

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

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

(If Other Registered Agent's signature is required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME VAUGHN, RICHARD S.
STREET ADDRESS 6336 ANTIETAM DRIVE
CITY-STATE-ZIP PENSACOLA FL ☐ DELETE

TITLE ST
NAME VAUGHN, MARGARET P
STREET ADDRESS 6336 ANTIETAM DR
CITY-STATE-ZIP PENSACOLA FL ☐ DELETE

TITLE V
NAME VAUGHN, JAMES
STREET ADDRESS 6336 ANTIETAM DR.
CITY-STATE-ZIP PENSACOLA FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY-STATE-ZIP ☐ Change ☐ Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP ☐ Change ☐ Addition

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-STATE-ZIP ☐ Change ☐ Addition

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-STATE-ZIP ☐ Change ☐ Addition

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-STATE-ZIP ☐ Change ☐ Addition

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/96

(904) 477-2200

CR2E034 (12/95)