## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

721924

(9)

JULE F. WOOD AND EDNA N, INC.					
Principal Place of Business	Mailing Address				
2002 REDBRIDGE DR. BRANDON FL 33511	2002 REDBRIDGE DR. BRANDON FL 33511	3. Date Incorporated or Qualification 10/21/1971			
		4. FEI Number 51-0165183			
Principal Place of Business 1	2a. Mailing Address	5. Certificate of Status Desired			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Election Campaign Financing Trust Fund Contribution			
City & State	City & State	7. Is this nonprofit corporation a			

or Qualified

Applied For Not Applicable \$8.75 Additional

Fee Required

**FILED** 

Apr 22 1998 8:00am

Secretary of State

Suite, Apt.	#, etc. Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be							
22		27				Trust Fund Contribution		Added to			
City & State	<b>o</b>	City & State	City & State		7.	7. Is this nonprofit corporation a homeowners association?					
23		28						☐ Yes [	No		
_ Zip	Country	Zip	-	Country		8.	This corporation owes or				
24	[25]	29	36	이			Personal Property Tax de			_l No	
9. Name and Address of Current Registered Agent				81	10. Name and Address of New Registered Agent						
			"	81 Name							
	DANIEL G.			82	82 Street Address (P.O. Box Number is Not Acceptable)						
2002 REDBRIDGE DR.			92	800							
BRANDO	N FL 33511			83	83						
			84	City	FL 85 Zip Code						
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Flo	rida Statutes,	the above	-named	corporation	n submits this statement f	or the purpose o	changing It	s registered	
office or r	egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such cha dations of, Section 61	ange was aut 7.0503. Floric	norized by da Statutes	the corp	poration's b	ooard of directors. I hereb	y accept the app	iointment as	registered	
SIGNATURE		•									
SIGNATURE .	Stgnature, typed or printed name of registered ag	gent and title if applicable.	(NOTE R	Registered Age	nt signature	required when	reinstating)	DATE			
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO	OFFICERS AND			
TITLE	STD	LI	DELETE	1.1 TITLE					L Change	■ Addition	
NAME	BLEICH, DANIEL			1.2 NAME		ļ					
STREET ADDRESS	2002 REDBRIDGE DR.			1.3 STREET	AODRESS	1					
CITY-ST-ZIP	BRANDON FL			1.4 CITY-S	T-ZIP						
TITLE	PD		DELETE	2.1 TITLE		Į.			☐ Change	Addition	
NAME	GRIFFIN, WOODROW L.			2.2 NAME							
STREET ADDRESS	RT 2 BOX 1036 BRYAN RD			2.3 STREET	address						
CITY-ST-ZIP	TAMPA FL			2.4 CITY-S	ST-ZIP						
TITLE	VD	LJ	DELETE	3.1 TITLE				,	☐ Change	Addition	
NAME	LEHMANN, BERT			3.2 NAME			_				
STREET ADDRESS	9704 SKEWLEE ROAD			3.3 STREET	ADDRESS	1971	6 RHEASEE D	R			
CITY-ST-ZIP	THONTOSASSA FL			3.4. CITY - S	T-ZIP	LUTZ	, FL 33549				
TITLE		المبا	DELETE	4.1 TITLE					L Change	Addition	
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET	ADDRESS						
CITY - ST - ZIP				4.4 CITY-S	T- 21P						
TITLE		السا	DELETE	5.1 TITLE					Change	Addition	
NAME			i	5.2 NAME							
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP		<del></del>		5.4 CITY - ST	T-ZIP						
TITLE		Li	DELETE	6.1 TITLE					☐ Change	☐ Addition	
NAME				6.2 NAME	ļ	ļ					
STREET ADDRESS				6.3 STREET	address						
1											

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 617, and that my name address.

813-689-4472