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Jan 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F01658

(6)

1. Corporation Name

WENSOUTH CORPORATION

W990-5835-000



Principal Place of Business

2040 NORTHWEST 67TH PLACE
GAINESVILLE FL 32653
US

Mailing Address

P.O. BOX 5278
GAINESVILLE FL 32602-5278
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/1980

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CARPENTER, RONALD A.
~~4127 NW 27 LANE~~
~~GAINESVILLE FL 32653~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5608 N.W. 43RD STREET

83

84 City

GAINESVILLE

FL

85 Zip Code

32653

10. Name and Address of New Registered Agent

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME O NEIL, DENNIS
STREET ADDRESS 2040 NORTHWEST 67TH PLACE
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE P ☐ DELETE

NAME THOMAS, MALLINI G
STREET ADDRESS 2040 NORTHWEST 67TH PLACE
CITY-ST-ZIP GAINESVILLE FL

TITLE S ☐ DELETE

NAME CARPENTER, RONALD
STREET ADDRESS 2040 NORTHWEST 67TH PLACE
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE D ☐ DELETE

NAME THOMAS, MALLINI G
STREET ADDRESS 2040 NORTHWEST 67TH PLACE
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE T ☐ DELETE

NAME WHALEN, CHERYL L
STREET ADDRESS 2040 NORTHWEST 67TH PLACE
CITY-ST-ZIP GAINESVILLE FL 32653

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

Christ A. Whalen

1/22/98

(352) 376-9259

CR2E034 (10/97)