

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED AND FILED
95 MAR 22 PH 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F03804 (4)
1. Corporation Name
WEIR UNLIMITED, INC.

Principal Place of Business Mailing Address
208 WATERWOOD DR YALAHA FL 34797 **208 WATERWOOD DR YALAHA FL 34797**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	10/23/1980	02/23/1994	4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2039298	Not Applicable
22	27	5. Certificate of Status Desired		<input type="checkbox"/>	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	
23	28	<input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
24	25	29	30	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KNOIZEN, ARTHUR K. 13311 SUNSET HARBOR RD. WEIRSDALE FL 32195				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City		
				85	Zip Code		
				FL			

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OECHSLIN, ROBERT E	1.2 NAME	
STREET ADDRESS	208 WATERWOOD DR	1.3 STREET ADDRESS	
CITY - ST - ZIP	YALAHA FL	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGARTER, NANCY K	2.2 NAME	
STREET ADDRESS	10493 SE 157 LANE	2.3 STREET ADDRESS	
CITY - ST - ZIP	WEIRSDALE, FL 08888	2.4 CITY - ST - ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNOIZEN, ARTHUR K	3.2 NAME	
STREET ADDRESS	13311 SUNSET HARBOR ROAD	3.3 STREET ADDRESS	
CITY - ST - ZIP	WEIRSDALE, FL 00000	3.4 CITY - ST - ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARNEY, JEAN A	4.2 NAME	
STREET ADDRESS	11 OAKLEAF DRIVE	4.3 STREET ADDRESS	
CITY - ST - ZIP	CLIFTON PARK NY	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 (change), or in an attachment with an affidavit.

SIGNATURE: Robert E. Oechslin **ROBERT E. OECHSLIN**
DATE: 3/13/95 (904) 324-3611
Typed Name of Signer