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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

CORPORATION ANNUAL REPORT 1998		Sandra B. Secretary DIVISION OF CO	of State	Jan 15 1998 8:00am Secretary of State
DOCUMENT # F13035 WIEGAND BROTHER, INC.		35 (3)		Scoretary or State
TTIEGO	MO DITOTALLIS INC.			E FRANCO HINE HIROS SILIF NOTAN HIRO DIAL BION BION BION AND AND AND AND AND AND AND AND AND AN
B 4 - 1 - 1 - 1 - 1				
Principal Place of Business Mailing Address				
7454 SO TAI C/O RICHAR SARASOTA F	D L. WIEGAND	7454 SO TAMIAMI TRAIL C/O RICHARD L WIEGANI SARASOTA FL 34231	D	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				12/23/1980
	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21 Cuito Ant	A	26		59-2047876 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip 24	Country 25	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curr		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
WIEGAND, RICHARD L. 81 Name				
TATA OOLUTA TARRAM TOAR				ress (P.O. Box Number is Not Acceptable)
	RASOTA FL 34231		62 Sireet Add	ress (F.O. Box Number is Not Acceptable)
			83	
			84 City	■■ 85 Zip Code
44 Durawant	to the area delega of Castions 607.0	500 and 607 4500 Florida Olah Ma		 - _
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 a	agent and title if applicable. (NOTE:	Registered Agent signature requi	ited when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WIEGAND, RICHARD L		1.2 NAME	
STREET ADDRESS	7454 SOUTH TRAIL		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	SARASOTA, FL 00000 DV	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	I Change I Addition
NAME	WIEGAND, GREGG A	Land Decerte	2.2 NAME	☐ Change ☐ Addition
STREET ADDRESS	7454 SOUTH TRAIL		2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000		2. 4 CITY - ST - ZIP	
TITLE	DST	DELETE	3.1 TITLE	Change Addition
NAME	WIEGAND, GARY S		3.2 NAME	• —
STREET ADDRESS	7454 SOUTH TRAIL		3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 00000		3.4. CITY-ST-ZIP	
TITLE	DV	DELETE	4.1 TITLE	Change Addition
NAME	WIEGAND, LANCE		4. 2 NAME	
STREET ADDRESS	7454 SOUTH TRAIL		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	SARASOTA, FL 00000	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME			5.1 HILE 5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6,1 TITLE	Change Addition

14. Thereby certify that the information supplie indicated on this annual/eport or supplien officer or director of the corporation of the Block 12 or Block 13 if changed, or on any with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that 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 exercise or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the chiral many many control of the contr

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6,4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

January 6, 1998

(941) 921-5755

FILED