FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 24 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F35884** **(8)**

1. Corporation Name
WICKHAM ROAD ESTATES, INC.

Principal Place of Business	Mailing Address
3750 N.W. 87 AVE., SUITE 500 MIAMI FL 33178	3750 N.W. 87 AVE., SUITE 500 MIAMI FL 33178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/21/1981
3a. Date of Last Report: 04/22/1994

2. Principal Place of Business	2a. Mailing Address
21 6285 OLD MEDINAH CIRCLE	26 6285 OLD MEDINAH CIRCLE
Suite, Apt. #, etc. 22 C/O WESTBROOKE	Suite, Apt. #, etc. 27 C/O WESTBROOKE
City & State 23 LAKE WORTH, FLA	City & State 28 LAKE WORTH, FLA.
Zip 24 33467 County 25 USA	Zip 29 33467 County 30 USA

4. FEI Number: 59-2778223 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STONE, ROBERT SR. 3750 N.W. 87TH AVENUE, #500 MIAMI FL 33178	81 Name: STONE ROBERT SR. 82 Street Address (P.O. Box Number is Not Acceptable): 6285 OLD MEDINAH CIRCLE 83 84 City: LAKEWORTH FL 85 Zip Code: 33467

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 Sections 607.0505, Florida Statutes.

SIGNATURE: Robert Stone Sr. 4/17/95
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	11 TITLE	☐ Change ☐ Addition
NAME	WEHMEYER,HORST	12 NAME	
STREET ADDRESS	ELBINGER WEG 20	13 STREET ADDRESS	
CITY ST ZIP	4 DUSSELDORF 80 W.G.	14 CITY ST ZIP	
TITLE	D	21 TITLE	☒ Change ☐ Addition
NAME	STONE, ROBERT	22 NAME	
STREET ADDRESS	3750 N.W. 87 AVE., SUITE 500	23 STREET ADDRESS	6285 OLD MEDINAH CIRCLE
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	LAKE WORTH, FLA. 33467
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	WOLLNY,RAINER M.	32 NAME	
STREET ADDRESS	UNTERSTAAT 45	33 STREET ADDRESS	
CITY ST ZIP	WEST GERMANY	34 CITY ST ZIP	
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	SCHAGEN,FRITZ	42 NAME	
STREET ADDRESS	WASSERWERKSWEG 14A	43 STREET ADDRESS	
CITY ST ZIP	WITTALAER,W.GERMANY	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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 added above.

SIGNATURE: Robert Stone Sr. 4/17/95 (407) 434-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number
ROBERT STONE SR., DIRECTOR

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