

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

PROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSFILED
Mar 07 1997 8:00am
Secretary of State**DOCUMENT # F96000006722 (0)**

1. Corporation Name

JASPER WYMAN & SON CO.

Principal Place of Business

Mailing Address

**MAIN ST.
MILBRIDGE MN 04658****MAIN ST.
MILBRIDGE MN 04658**

3. Date Incorporated or Qualified

12/23/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Main Street**26 P. O. Box 100, Main St.**

State, Apt. #, etc.

Suite Apt. #, etc.

22
City & State
23 Milbridge, ME**27**
City & State
28 Milbridge, ME

Zip

Country

Zip

Country

24 04658**25****29 04658****30**4. FEI Number
01-0343273

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

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

83

84 City

FL

85 Zip Code

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 **VD** ☐ DELETE
NAME **DOUDOUMOPOULOS, ELIZABETH W**
STREET ADDRESS **2900 29TH ST., N.W.**
CITY- ST- ZIP **WASHINGTON DC 20008**1.1 TITLE **P** ☐ Change ☒ Addition
1.2 NAME **Edward Flanagan**
1.3 STREET ADDRESS **22 South Main Street**
1.4 CITY- ST- ZIP **Topsfield, MA 01983**TITLE **D** ☐ DELETE
NAME **DOUDOUMOPOULOS, ALEXANDER MD**
STREET ADDRESS **2900 29TH ST., N.W.**
CITY- ST- ZIP **WASHINGTON DC 20008**2.1 TITLE **V** ☐ Change ☒ Addition
2.2 NAME **Gary Willey**
2.3 STREET ADDRESS **Main Street**
2.4 CITY- ST- ZIP **Milbridge, ME 04658**TITLE **D** ☐ DELETE
NAME **WILKINSON, A W**
STREET ADDRESS **6 SANDHILL DR.**
CITY- ST- ZIP **BRUNSWICK ME 04011**3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIPTITLE **D** ☐ DELETE
NAME **GELSTHORPE, EDWARD**
STREET ADDRESS **50 SOUTH ST., BOX 857**
CITY- ST- ZIP **EAST DENNIS MA 02841**4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIPTITLE **D** ☐ DELETE
NAME **O'DONNELL, JOHN F**
STREET ADDRESS **1140 7TH CT., #H**
CITY- ST- ZIP **VERO BEACH FL 32980**5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIPTITLE **D** ☐ DELETE
NAME **WILKINSON, JOHN**
STREET ADDRESS **96 MAIN ST.**
CITY- ST- ZIP **NATICK MA 01780**6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/97

207-546-2311

Daytime Phone # 0012113

CR2E034 (9/96)