

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000003909 (5)**

1. Corporation Name
WAYNE PRODUCTS, INC.



Principal Place of Business 9603 SATELLITE BLVD., #110 ORLANDO FL 32837	Mailing Address 9603 SATELLITE BLVD., #110 ORLANDO FL 32837
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 P.O. Box 770668 27 Suite, Apt. #, etc. 28 City & State 29 Zip Country 30 32877-0668 ORANGE		3. Date Incorporated or Qualified 07/24/1997	
				4. FEI Number 31-0921758	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent LIN, CYNTHIA A 9603 SATELLITE BLVD., #110 ORLANDO FL 32837		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	PDC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIN, KINGSO C	1.2 NAME	
STREET ADDRESS	1632 TOWER CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEWARK OH 43055	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIN, WAYNE A	2.2 NAME	
STREET ADDRESS	4878 SMOKETALK LN.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTERVILLE OH 43081	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIN THESING, SONYA	3.2 NAME	
STREET ADDRESS	5123 45TH ST NW	3.3 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20016	3.4 CITY-ST-ZIP	
TITLE	STDC	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIN, CYNTHIA	4.2 NAME	
STREET ADDRESS	13815 FAIRWAY ISLAND DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32837	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 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: *Cynthia A. Lin* 7-1-98 407 855-0883

CR2E034 (5/98)

TOUR GOLF

O R L A N D O

(2)

Dear Sir,

I am enclosing a copy of a letter sent to you on July 1 explaining why the document was filed late. I had spoken with someone in the department and they ask me to put the explanation in writing.

Today I received the document and the checks in the mail. When I spoke again to someone in the department, they felt that if I had sent the letter in the preprinted envelope, the correct department did not receive my letter of explanation.

Therefore, I am sending the letter to your address along with the document and the checks, hoping that you will accept my letter of explanation and not charge the late fee.

I remain,

Most sincerely,



Cynthia A. Lin
Secretary, Treasurer
Wayne Products, Inc.

TOUR GOLF
O R L A N D O

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July 1, 1998

Florida Department of State
Divisions of Corporations
P.O.Box 6327
Tallahassee, FL 32314

Dear Sir,

We are a part of a larger corporation in Ohio. We came to Orlando to have a distribution warehouse so we could ship faster to our Florida customers.

We did not receive an annual report packet until the SECOND NOTICE packet came in today's mail. A month or so ago, we rented a post office box because we were having problems with some of the mail delivery.

The purpose of this letter is to ask for dismissal of the late filing fee for this report.

Our records of tax responsibility for the past 15 years in Ohio will tell you that we do take our responsibilities seriously and that this tax will now be on our calendar and we will not be late again.

Thanking you for the consideration of the penalty dismissal request.

Most sincerely,



Cynthia A. Lin
Secretary/Treasurer
Wayne Products Inc., dba Tour Golf Orlando