## 2-20-98 B-2361 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

(0)

W. H. ALBRIGHT & ASSOC., INC.

Principal Place of Business			Mailing Address			-  1	III DI DI BIDIL DI		HAM BIBAI HADI	
1345 COVEY	COURT		1345 COVEY COURT							
VENICE FL 3	14293		VENICE FL 34293				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Quali		3FAUL	
							03/10/1983	1100		
2. Principal P	Place of Busi	ness	2a. Mailing Addr	ess		<del></del>	4. FEI Number	<del></del>	TI	Applied For
21			26			59-2295496		-	Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desire	a 🗆	\$8.75	Additional	
22			27]			a. Continuate of Status Desire	·	Fee	Required	
City & State	te		City & State				6. Election Campaign Financi			O May Be
23 Country			28				Trust Fund Contribution			d to Fees
Zip	Country		Zip		Country		8. This corporation owes or h	-		
24	A Name	25 and Address of Curren	1 Pagistared Agent	30		<del></del>	Personal Property Tax due  10. Name and Address of Ne		X Yes	No No
			Thousand Agent	<del></del>	B1	Name	IV. Italia Bila Radiose Of Ita	W Hogieloled	Agoin	· · · · · · · · · · · · · · · · · · ·
	IYD <b>E</b> R, W.									
351 WEST VENICE AVENUE VENICE FL 33595			82 Street A			Street Addre	dress (P.O. Box Number is Not Acceptable)			
VE	MICE FL 3	3080			83			<u> </u>		
									T T	
					84	City		FL	85 Zi	p Code
11. Pursuant	to the provis	ions of Sections 607.0502	2 and 607.1508, Floric	da Statutes, the	above	named corpo	oration submits this statement for	the purpose of	of changing	its registered
office or re	registered ag ım familiar w	gent, or both, in the State i ith, and accept the obliga	of Florida. Such chan- itions of, Section 607.	ge was authoriz 0505. Florida St	ed by	the corporatio	on's board of directors. I hereby a	accept the app	pointment a	as registered
SIGNATURE		, a a								
SIGNATURE	Signature, typed	or printed name of registered agen		(NOTE Registe	red Age	nt eignature required	<u>-</u>	DATE		
12.	<del></del> -	OFFICERS AND		13			ADDITIONS/CHANGES TO (	OFFICERS AN		
TITLE	P		□ D€		TITLE				L. Change	Addition
NAME		HT, WAYNE H III		<b>B</b>	NAME					
STREET ADDRESS		OVEY COURT			STREET	ADDRESS				
CITY-ST-ZIP	VENIUE	, FL 00000								
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14. I hereby certify that the information supplied with this filing does not quality 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 chapped, or on an attachment with an address.

941.4930199

**FILED** 

Feb 20 1998 8:00am

Secretary of State