

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra D. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 26 PM 4:09

DOCUMENT # G42895

(4)

1. Corporation Name

WHEELED COACH INDUSTRIES, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/08/1983	3a. Date of Last Report 08/10/1994
4. FEI Number 59-2309315	Applied Fee 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. 193.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. 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 of applicant

(If title, Registered Agent signature required when installing)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, DON L.	1.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	1.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	1.4 CITY - ST - ZIP	
TITLE	VTD	2.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, DONALD LYNN	2.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	2.4 CITY - ST - ZIP	
TITLE	PD	3.1 TITLE	☐ Change ☐ Addition
NAME	GOETSCH, GARY	3.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	3.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	3.4 CITY - ST - ZIP	
TITLE	SD	4.1 TITLE	☐ Change ☐ Addition
NAME	EDIGER, LEWIS	4.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	4.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	4.4 CITY - ST - ZIP	
TITLE	AS	5.1 TITLE	☐ Change ☐ Addition
NAME	WAITS, JAMES	5.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	5.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	5.4 CITY - ST - ZIP	
TITLE	EVP	6.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, ROBERT	6.2 NAME	
STREET ADDRESS	2737 FORSYTH RD	6.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK FL	6.4 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 110.07(3)(a), Florida Statutes. I do hereby certify that the information included on this annual report is supplemental annual report in 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; that I am the member 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 in 13 if not changed with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Dayton Press