

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # G82661 (1)
1. Corporation Name
WENTCO, INC.



Principal Place of Business: **3861 EDWARDS ST FORT MYERS FL 33916 US**
Mailing Address: **3861 EDWARDS STREET FT. MYERS FL 33916 US**

3. Date Incorporated or Qualified: **02/01/1984**
3a. Date of Last Report: **03/09/1995**
4. FEI Number: **59-2391390**
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

2. Principal Place of Business: **21 3861 EDWARDS ST**
2a. Mailing Address: **26 3861 EDWARDS STREET**
22. State, Apt. #, etc.: **NONE**
27. State, Apt. #, etc.: **NONE**
23. City & State: **FORT MYERS, FL.**
28. City & State: **FORT MYERS, FL.**
24. Zip: **33916** 25. Country: **USA**
29. Zip: **33916** 30. Country: **USA**

9. Name and Address of Current Registered Agent
**BROWN, FLETCHER
124 NORTH BREVARD AVENUE
P.O. BOX 349
ARCADIA FL 33821**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0102 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 607.0105, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: EARLE, RONNIE J.	1.1 TITLE: D	1.2 NAME: BELISLE, DANIEL L.
STREET ADDRESS: 168 CORAL DRIVE	CITY-STATE-ZIP: FT. MYERS FL	1.3 STREET ADDRESS: 107 S. MAPLE AVENUE	1.4 CITY-STATE-ZIP: LEHIGH ACRES, FL 33936
TITLE: V	NAME: THOMAS, ROBERT C.	2.1 TITLE: D	2.2 NAME: MC DUFFIE, RICHARD H.
STREET ADDRESS: 6 SEVILLA AVE	CITY-STATE-ZIP: ARCADIA FL	2.3 STREET ADDRESS: 608 NUNA AVENUE	2.4 CITY-STATE-ZIP: FORT MYERS, FL. 33905
TITLE: VD	NAME: NOBLES, GERALD	3.1 TITLE: D	3.2 NAME: RUSSO, PHILIP A.
STREET ADDRESS: 144 FLORIDA STREET	CITY-STATE-ZIP: FORT OGDEN FL	3.3 STREET ADDRESS: 1380 PINE STREET	3.4 CITY-STATE-ZIP: NAPLES, FL 33942
TITLE: S	NAME: PEKAREK, CATHERINE J	4.1 TITLE: S	4.2 NAME: PEKAREK, CATHERINE J
STREET ADDRESS: 2112 SW 2ND ST	CITY-STATE-ZIP: CAPE CORAL FL	4.3 STREET ADDRESS: 2112 SW 2ND ST	4.4 CITY-STATE-ZIP: CAPE CORAL FL
TITLE: T	NAME: CARR, DEBRA L.	5.1 TITLE: T	5.2 NAME: CARR, DEBRA L.
STREET ADDRESS: 1311 S.E. 21ST TERR.	CITY-STATE-ZIP: CAPE CORAL FL	5.3 STREET ADDRESS: 1311 S.E. 21ST TERR.	5.4 CITY-STATE-ZIP: CAPE CORAL FL
TITLE: 	NAME: 	6.1 TITLE: 	6.2 NAME:
STREET ADDRESS: 	CITY-STATE-ZIP: 	6.3 STREET ADDRESS: 	6.4 CITY-STATE-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: D	1.2 NAME: BELISLE, DANIEL L.
1.3 STREET ADDRESS: 107 S. MAPLE AVENUE	1.4 CITY-STATE-ZIP: LEHIGH ACRES, FL 33936
2.1 TITLE: D	2.2 NAME: MC DUFFIE, RICHARD H.
2.3 STREET ADDRESS: 608 NUNA AVENUE	2.4 CITY-STATE-ZIP: FORT MYERS, FL. 33905
3.1 TITLE: D	3.2 NAME: RUSSO, PHILIP A.
3.3 STREET ADDRESS: 1380 PINE STREET	3.4 CITY-STATE-ZIP: NAPLES, FL 33942
4.1 TITLE: S	4.2 NAME: PEKAREK, CATHERINE J
4.3 STREET ADDRESS: 2112 SW 2ND ST	4.4 CITY-STATE-ZIP: CAPE CORAL FL
5.1 TITLE: T	5.2 NAME: CARR, DEBRA L.
5.3 STREET ADDRESS: 1311 S.E. 21ST TERR.	5.4 CITY-STATE-ZIP: CAPE CORAL FL
6.1 TITLE: 	6.2 NAME:
6.3 STREET ADDRESS: 	6.4 CITY-STATE-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)(k), 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 secretary 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 to an address.

SIGNATURE: *Debra L Carr* 02/16/96 (941)694-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE TELEPHONE #

CR2E034 (12/95)