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 #

J31450

(6)

WPL, INC.

Princip

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Suit 22 City 23

FILED Jan 30 1998 8:00am Secretary of State

Principal Place of Business		Mading Address				I IMMINIM BIRM INION NIMIN BIRMI MININ MANIN BIRNI BIRNI N	DIBII 01011 AIBII 01011 1001		
8529 CENTRAL AVE. ST. PETERSBURG FL 33710		6529 CENTRAL AVE. St. Petersburg FL 33710				DO NOT WRITE IN THIS SPACE			
	<u></u>					 Date Incorporated or Qualified 09/03/1986 			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	Applied For		
		26				59-2840882	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5, Certificate of Status Desired	esired S8.75 Additional Fee Required		
City & State		City & State			6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution □ Added to Fees				
Žip	Country 25	7ip 29	30	untry		This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible Yes		
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LOEBENBERG, DAVID A. 6529 CENTRAL AVE. ST. PETERSBURG FL 33710				81	Name Street Add	dress (P.O. Box Number is Not Acceptable)			
				83					

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

City

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 lifte if applicable (NOTE: Registered Agent signature required when reinstating) DATE												
12.	OFFICERS AND D	RECTORS	13.	ADDITIONS/CHANGES T	O OFFICERS AND DIRECTOR	RS IN 12						
TITLE	DV	DELETE	1 1 1 TLE		Change	☐ Addition						
NAME	LOEBENBERG, DAVID A.		1.2 NAME			1						
STREET ADDRESS	6529 CENTRAL AVE.		1.3 STREET ADDRESS									
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY - ST - ZIP			ĺ						
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change	Addition						
NAME	MERMELSTEIN, SANDRA		2.2 NAME			J						
STREET ADDRESS	1568 OAK LANE		2.3 STREET ADDRESS			ļ						
CITY-ST-ZIP	CLEARWATER FL		2. 4 CHY-ST-ZIP									
TITLE	D	DELETE	3.1 TITLE		Change	Addition						
NAME	LOEBENBERG, MICHAEL		3.2 NAME			į						
STREET ADDRESS	2385 CAMPBELL ROAD		3.3 STREET ADDRESS			1						
CITY-ST-ZIP	CLEARWATER FL 34625		3.4. CITY-ST-ZIP			J						
TITLE		DELETE	4.1 TITLE		☐ Change	Addition						
NAME			4. 2 NAME									
STREET ADDRESS			4.3 STREET ADDRESS									
CITY-ST-ZIP			4.4 CITY - ST - ZIP			l						
TITLE		DELETE	5.1 TITLE		☐ Change	■ Addition						
NAME			5.2 NAME									
STREET ADDRESS			5 3 STREET ADDRESS			ļ						
CITY-ST-ZIP			5.4 CITY - ST - ZIP									
TITLE		☐ DEL e te	6.1 TITLE		Change	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 charged, or on an attachment with an address.

SIGNATURE:

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January 26th, 1998

Zip Code