

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J35439

1. Corporation Name

W P UTILITIES, INC.

Principal Place of Business

Mailing Address

% JAMES W. VANCE
1615 FORUM PLACE, SUITE 200
WEST PALM BEACH, FL 33401

4570 LAKE WORTH ROAD
LAKE WORTH FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
9/25/86

4. FEI Number
59-2784095

Applied For
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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3500 W LANTANA RD

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

LANTANA FL

29 City & State

24 Zip

Country

25 Zip

Country

33462

PALM BEACH

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VANCE, JAMES W.
1615 FORUM PLACE
SUITE 200
WEST PALM BEACH, FL. 33401

81 Name
% HOMELAND MOBILE HOMES, INC.

82 Street Address (P.O. Box Number is Not Acceptable)
4570 LAKE WORTH RD

84 City LAKE WORTH

FL

85 Zip Code 33463

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 of 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

1.1 TITLE ☐ DELETE

NAME
PSTD
MEDEMA, ROGER E
STREET ADDRESS
3500 W LANTANA RD
CITY-ST-ZIP
LANTANA, FL

1.2 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
PD
MEDEMA, ROGER E
1.3 STREET ADDRESS
4570 LAKE WORTH RD
1.4 CITY-ST-ZIP
LAKE WORTH FL 33463

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
TSD
MEDEMA, MICHAEL W
2.3 STREET ADDRESS
4570 LAKE WORTH RD
2.4 CITY-ST-ZIP
LAKE WORTH FL 33463

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***150.00

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:

MICHAEL W MEDEMA - Direct 4/30/98

(561) 433-1166