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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # J42734**

1. Corpora ion Name WENSRIC, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90001 043 \*\*\*150.00



					: !		10011 B1 811 B1811 1001	
Principal Place	e of Business	Mailing Address						
220 HICKORY AVE MERRITT ISLAND FL 32953 US		220 HICKORY AVE. MERRITT ISLAND FL 32953 US		DO NOT WRITE IN THIS SPACE				
00					3. Date ir corporated or Qualifed 11/18/1986			
2. Principa P	lace of Business	2a. Mailing Address		4. FEI Number		Applied For		
21		26		58-1718964		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Recuired		
City & S.at	e	City & State		6. Election Campaign Financing	\$5.	\$5.00 May Be		
23		28		Trust Fund Contribution		Added to Fees		
Zip	Country	Zip	Country 30		This corporation owes the current year Persor at Property Tax.	ntangible □ Yes □ ἼNo		
24 25 29			וט	10. Name and Address of New Registered Agent				
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registe	rea Agent		
JORDAN, GEORGIANNA			0'	Name				
45 BARONY DRIVE				Street Acc	eet Ac dress (P.O. Box Number is Not Acceptable)			
MERRITT ISLAND FL 32953			83					
			84	City		FL 85	Zip Code	
office crr	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the oblig	e cf Florida. Such change was ₁utl	horized by	the corporat	rporation submiss this statement for the purposition's board of directors. I hereby accept the a	e of changing of ointment a	g its registered is registered	
SIGNATUFE					ired when reinstation) DAT	F		
organicate, types or printed to				nt signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12 OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO UTFICERS	3 NNU DIKE	CIUNGINIZ	

☐ Change ☐ Addition DELETE 1.1 TITLE TITLE WENDI JORDAN-HART 1.2 NAME NAME 4955 SHADE TREE DR 1.3 STREET ADDRESS STREET ADDRESS COCOA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE TITLE JORDAN, GEORGIANNA 22 NAME NAME 220 HICKORY AVE. 2.3 STREET ADDRESS STREET ADORESS MERRITT ISLAND FL 2 4 CITY-ST-ZIP CITY-ST-ZIP - 🔲 Addition Change □ DELETE 31 TITLE TITLE JAMES E HART, II 3.2 NAME NAME 4955 SHADE TREE DRIVE STREET ADDRESS 3.3 STREET ADDRESS COCOA FL CITY-ST-ZIP 34, CITY-ST-ZIP ☐ DELETE Change ☐ Addition 4.1 TITLE TITLE RICHARD D JORDAN 4 2 NAME NAME 265 SPRUCE 4.3 STREET ADDRESS STREET ADDRESS MERRITT ISLAND FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I heret y certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(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, with all other like empowered.

SIGNATURE: >

24-99 407 4525189

CR2E034 (11/98)