## 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 #

J47395

(5)

A.J. WURZELBACHER COMMERCIAL PAINTING, INC.

**FILED** Feb 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				1 100 110 110 110 110 110 110 110 110 1
21013 SECOND STREET 21013 SECOND STREET				
LAND O LAKES FL 34839		LAND O LAKES FL 34639		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				12/16/1986
2. Principa	al Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-2744235 Not Applicable
Suite, A	pt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & S	State	City & State		6. Election Campaign Financing \$5.00 May Be
23	1 0	28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 9, Name and Address of Current	29 3	10	Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent
1		Trogretorou Agent	<b>61</b> Na	Name
	Wurzelbacher, Brenda L. 8013 <b>Se</b> cond St.			
LAND O LAKES FL 33539			82 Str	Street Address (P.O. Box Number is Not Acceptable)
TAMD O TAVES LF 20008			83	
			84 Cit	City FL 85 Zip Code
11. Pursua	ant to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	the above-nai	
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 if applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	0	DELETE	1.1 TITLE	Change Addition
NAME	Wurzelbacher, Brenda L		1.2 NAME	
STREET ADDRE	AAAA AEAANIN AT		1.3 STREET ADDR	DRESS
CITY - ST - ZIP	LAND O LAKES FL		1.4 CITY-ST-ZIP	1 111
TITLE	Р	DELETE	2.1 TITLE	Change Addition
NAME	WURZELBACHER, ANDREW J		2.2 NAME	
STREET ADDRE	**** ****		2.3 STREET ADDR	DRESS
CITY-ST-ZIP	LAND O LAKES FL 33539		2. 4 CITY - ST - ZIP	ZIP
TITLE	VP	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Wurzelbacher, Jr.		3.2 NAME	
STREET ADDRES	AAAA AFAALIA AT		3.3 STREET ADDR	DRESS
CITY-ST-ZIP	LAND O'LAKES FL 33539		3.4 CHTY-ST-ZIP	21P
TITLE	8	DELETE	4.1 TITLE	Change Addition
NAME	JOHNSTON, GENE		4. 2 NAME	DECETE
STREET ADDRES	ss 9920 HARNEY RD		4.3 STREFT ADDR	DRESS DICE TE
CITY-ST-ZIP	THONOSASSA FL 33592		4.4 CITY - ST - ZIP	1 <del>2</del> 14
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRES	22		5 3 STREET ADDRE	DRESS
CITY-ST-ZIP			54 CITY-ST-ZIP	IP
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRES	es		6.3 STREET ADDRE	DRESS
CITY-ST-ZIP			6.4 CITY - ST - ZIP	<b>!</b>
44 15				

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 any attachment with an address.