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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J54817

(8)

Mailing Address

WITS END I CORPORATION

Principal Place of Business

FILED

Apr 04 1997 8:00am

Secretary of State

| 13600 GULF BLV MADERIA BEACH | | 13600 GULF BLVD Maderia Beach Fl 33708-2520 | | | | | | | |
|--|---|--|----------------|--------------|---|--|-------------|-------------------------------|---------------|
| ! | | | | | | 3. Date incorporated or Qualified 01/29/1987 | 1 | e of Last Ri 7/1996 | |
| 2. Principal Place of Business 2a. Mailing Address | | | 3 | | | 4. FEI Number | | | oplied For |
| 21 | | 26 | | | 59-3033030 | | | ot Applicable | |
| Suite, Apt. (22 | #. etc | Suite, Apt #, etc. | | | 5. Certificate of Status Desired | | \$8.75 A | 1 | |
| City & State 23 | | City & State | | | Election Campaign Financing Trust Fund Contribution | ibution Added to Fees | | | |
| Zip 24 | Country 25 | Zip 29 | 30 Cou | ntry | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No | | | |
| | 9. Name and Address of Curre | nt Registered Agent | | 241 | | 10. Name and Address of New Re | gistered A | gent | |
| | OZZI, WILLIAM J. | | | 61 | Name | | | | İ |
| 13600 GULF BLVD MADERIA BEACH FL 33708 | | | | 82 | Street A | Address (P.O. Box Number is Not Acceptab | le) | | |
| | | | | 83 | | | | | |
| . | | | | 84 | City | 4 | FL | 85 Zip (| Code |
| 11. Porsuant i | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Stati | utes, the al | DOVE-f | named (| corporation submits this statement for the p | urnose of | changing if | ts registered |
| office or u | egistered agent, or both, in the Stati m famil ar with, and accept the obliq | e of Florida. Such change was | s authorizer | d hv ti | he corp | poration's board of directors. I hereby accept | ot the appo | ointment as | registered |
| • | m ramiliar with, and accept the obig | gandina bil, decilori bor losos, i | TOTION OTHER | Giog. | | | | | |
| SIGNATURE . | Signature, type of or printed number of registered as | jen and the if applicable (NC | O'lt Registere | d Agent | signature | required when reinstating) | DATE | | |
| 12. | OFFICERS AN | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIRECTOR | RS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TI | TLE | | | | ☐ Change | Addition |
| NAME | NARDOZZI, WILLIAM J. | | 1.2 N | AME | | | | | |
| STREET ADDRESS | ARREST DIST | | | REET AL | DDRESS | | | | |
| CITY-ST-7P | MADERIA BEACH FL 33708 | | 1.4 CI | 4 CHY+ST-ZIP | | | | | |
| 1711 | D | | | 2.1 TITLE | | | | Change | Addition |
| NAME | NARDOZZI, DOROTHY J. 2 | | 2.2 N | 2.2 NAME | | | | | |
| STREET ADORESS | 13600 GULF BLVD | | 2.3 5 | FREET A | DIDRESS - | Company of | | | 1 |
| CI1Y - \$1 - 7/P | MADERIA BEACH FL 33708 | | 2.40 | HTY-ST- | -71P | | | | |
| 101.6 | | DELETE | | | $\overline{}$ | D | 1. | Change | Addition |
| NAME | | | 3.2 N | AME | | NARDOZZI Darren 13600 Gulf Blud Madeira Beach Fl 33 | K. | | <i>'</i> |
| STREET ADDRESS | | | 3.3 \$ | TREET AL | DDRESS | 13600 GWP Blvd | | / | |
| CITY - ST - ZIP | | | 34.0 | IIY-ST | - 7IP | Modelm Beach Fl 3: | 3708 | | |
| 1016 | | DELETE | 4.1.31 | TLE | | | | Change | Addition |
| NAME | | | 4.21 | | | | | | |
| STREET ADDRESS | | | | | DORESS | | | | |
| City - St - ZiP | | | | ITY-ST- | | | | | |
| TITLE | | ☐ OELETE | 5.1 1 | | | | | Change | Addition |
| | | | 5.2 N | | | | | - | |
| NAME COURT ADDRESS S | | | | | DDRESS | | | | |
| STREET ADDRESS | | | | 1712 ST - | | | | | |
| C TY+S1+ZiP | | DELETE | 5.4 C | | · L IF | | | Change | Addition |
| TI'LE | | Em Diritte | 6.2 N | | | | | | |
| NAME | | | | | DDDEGG | | | | |
| STREET ADDRESS | | | | | DDRESS | | | | ł |
| City-St-ZiP | | | 6.4 C | ITY-ST- | · ZIP | | | | |

14. Edo 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.