

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILEDCORPORATION
ANNUAL REPORT
1995FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

95 MAY -1 AM 10:15

DOCUMENT # J88446

(6)

1. Corporation Name

W.D.G. & CO., INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1680 W MCNAB RD
FT. LAUDERDALE FL 33309
US

Mailing Address

1680 W MCNAB RD
FT. LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1987

3a. Date of Last Report

03/22/1994

4. FEI Number

65-0003572

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.03?

Florida Statutes

☒ Yes☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

30

9. Name and Address of Current Registered Agent

GRAY, WILLIAM D
1680 W MCNAB ROAD
FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

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 fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GRAY, WILLIAM D.
STREET ADDRESS	1680 W. MCNAB ROAD
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	VD
NAME	PRILL, CARMEN M.
STREET ADDRESS	1680 W. MCNAB ROAD
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	SD
NAME	MALONEY, JOANNE
STREET ADDRESS	73 REDDING ROAD
CITY - ST - ZIP	GEORGETOWN CT
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
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	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM D. GRAY

5/1/95 (305) 975-9980