FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 18 PM 6:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J88963** **(0)**

1. Corporation Name

W.B.C., INC.

Principal Place of Business	Mailing Address
% W. TIMOTHY CURTIS 8 BARCELONA TRAIL ORMOND BEACH FL 32174	% W. TIMOTHY CURTIS 8 BARCELONA TRAIL ORMOND BEACH FL 32174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/18/1987**	3a. Date of Last Report: **10/31/1994**
4. FEI Number: **59-2852175**	☐ 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 has liable, for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No	

2. Principal Place of Business	2a. Mailing Address
21	26 W. Timothy Curtis
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 596 N. Nova Rd. # 302
City & State 23	City & State 28 Ormond Beach, FL
Zip 24 / County 25	Zip 29 32174 / County 30 Volusia

9. Name and Address of Current Registered Agent

CURTIS, W. TIMOTHY
8 BARCELONA TRAIL
ORMOND BEACH FL 32174

10. Name and Address of New Registered Agent

81 Name: W. Timothy Curtis
82 Street Address (P.O. Box Number is Not Acceptable): 596 N. Nova Rd. # 302
83
84 City: Ormond Beach FL 85 Zip Code: 32174

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: W. [signature], Pres. W. Timothy Curtis, Pres. 4/8/95
(Signature of Officer or Director) (Signature of Registered Agent, if Changing) (Typed or Printed Name of Person Signing) (Typed or Printed Name of Registered Agent, if Changing) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	CURTIS, WALTER	12 NAME	
STREET ADDRESS	107 SAWTOOTH LANE	13 STREET ADDRESS	
CITY ST ZIP	ORMOND BEACH FL	14 CITY ST ZIP	
TITLE	P	21 TITLE	☐ Change ☐ Addition
NAME	CURTIS, W. TIMOTHY	22 NAME	
STREET ADDRESS	107 SAWTOOTH LANE	23 STREET ADDRESS	
CITY ST ZIP	ORMOND BEACH FL	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	BENNETT, MARTHA LOU W.	32 NAME	
STREET ADDRESS	184 ORMOND PARKWAY	33 STREET ADDRESS	
CITY ST ZIP	ORMOND BEACH FL	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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: W. [signature], Pres. W. Timothy Curtis, Pres. 4/8/95 (904) 673-7853
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER (Date) (Daytime Phone #)

0010841 CP