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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K40262

(3)

Mailing Address

TWC DISTRIBUTORS, INC.

Principal Place of Business

FILED Apr 23 1997 8:00am Secretary of State

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| 240 FIELD END ROAD SARASOTA FL 34240 | | 240 FIELD END ROAD SARASOTA FL 34240-9703 | | | | | | | | | | | |
|---|--|--|-----------------------------------|-----------------|--------------|---------------|--|----------------|-----------------|------------------|------------------------------------|--------------|--------------------------|
| | | | | | | - | 3. Date Incorporated or Qualified 10/21/1988 | | | | 3a. Date of Last Report 04/18/1996 | | |
| | Place of Business | 2a. Mailir | 2a. Mailing Address | | | | | 4. FELN | | | | | Applied For |
| 21 | | 26 | | | | | | 65- | 0080211 | | | | Not Applicable |
| Suite, Apt. | . #, etc. | Suite, | Apt. #, etc. | | | | 1 | 5. Certifi | cate of Stati | us Desired | | | 5 Additional Required |
| City & Sta | te | | State | | | | | 6 Flection | on Campaig | n Financing | | | May Be |
| 23 | | 28 | | | | | | | Fund Contril | | | | d to Fees |
| Zip | Country | Zφ | | L., | Country | , | | 8. This c | orporation h | nas liability fo | | e tax unde | rs. 199.032, |
| 24 | 25 | 29 | | 30 | | | | | a Statutes | | | ☐ No | |
| | 9. Name and Address of Current | Registered . | Agent | | 81 | Name | 1 | IO. Name | and Addre | ss of New F | Registered | Agent | |
| | LIGAN, TIMOTHY E | | | | 61 | inarne | | | | | | | |
| | FIELD END ROAD | | | | 82 | Street A | Address | (P.O. Bo | x Number is | Not Accept | able) | | |
| SAR | IASOTA FL 34240 | | | | 83 | | | | | | | | |
| | | | | | 03 | ļ | | | | | | | |
| 35. | | | | | 84 | City | | | | | FL | 85 Z | p Code |
| | to the provisions of Sections 607.0502 | and 607 150 | B. Florida Statu | ites th | ne abovi | e-named | cornora | tion subn | nits this state | ement for the | | | a its registered |
| office or | registered agent, or both, in the State : | of Florida, Suc | ch change was | autho | rized by | vithe cord | poration | 's board o | of directors. | I hereby acc | ept the ap | pointment | as registered |
| • | am familiar with, and accept the obliga | tions of, Secti | on 607.0505, F | попиа | Statute | S. | | | | | | | |
| SIGNATURE | Signature typed or printed name of registered ager | s and title if applica | able (NG | III : Beg | istered Age | ent signature | required w | dien reinstatu | na) | | DATE | | ******* |
| 12. | OFFICERS AND | | | | 13. | | | | | GES TO OFF | ICERS AN | D DIRECTO | ORS IN 12 |
| TITLE | PD | | DELETE | 1 | 1.1 TITLE | | | | | | | Chang | e 🔲 Addition |
| NAME | MILLIGAN, TIMOTHY E | | | | 1.2 NAME | | | | | | _ | | |
| STREET ADDRESS | 2005 HERMITAGE BLVD. | | | | 1 3 STREET | ADDRESS | 280 | 05 H | ermitag | y Bluf | • | | |
| CITY-ST-ZIP | VENICE FL 34292 | | | | 14 CITY - S | ST - 71P | | | | | | | |
| TITLE | VD | | DELETE | | 2.1 TITLE | | | | | | | Chang | e Addition |
| NAME | j Milligan, Leonard W | | | J | 2.2 NAME |] | | | | | | | |
| STREET ADDRESS | 9023 RED CEDAR CIRCLE | | | - 1 | 2.3 STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | BRADENTON FL 34202 | | | | 2. 4 CITY- | S1-ZIP | | | | | | | |
| TITLE | VST | | DELETE | | 3.1 TITLE | | | | | | | Chang | e 🔲 Addition |
| NAME | MILLIGAN, KEVIN A | | | -) | 3.2 NAME | - | | | | | | | |
| STREET ADDRESS | 9240 MIDNIGHT PASS ROAD, U | INIT B | | | 3.3 STREET | ADDRESS | | | | | | | |
| CITY-\$1-ZIP | SARASOTA FL 34242 | | | | 3.4. CITY- | ST - ZIP | | | | | | | |
| TITLE | į | | ☐ DELETE | - 1 | 4 1 THLE | | | | | | | ☐ Chang | e 🔲 Addition |
| NAME | 1 | | | | 4.2 NAME | | | | | | | | |
| STREET ADDRESS | | | | | 4.3 STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | 4.4 CITY - 9 | 31 - 2IP | | | | · · | | | |
| TITLE | 1 | | ☐ DELETE | | 5.1 111LE | 1 | | | | | | ☐ Chang | e 🔲 Addition |
| NAME | | | | • | 5.2 NAME | | | | | | | | |
| STREET ADDRESS | | | | 1 | 5.3 STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | ļ | | | | 5.4 CITY - S | T-ZIP | | | | | | | |
| TITLE | | | L_ DELETE | 1 | 61 TITLE | | | | | | | Chang | e 🔲 Addition |
| NAME | | | | 1 | 62 NAME | | | | | | | | |
| STREET ADDRESS | | | | | 6.3 STREET | ADDRESS | | | | | | | |
| CITY-ST-ZIP | 1 | | | | 6.4 CITY - S | | | | | | | | |
| information in an o | by certify that the information supplied on indicated on this annual report or su officer or director of the orporation or | applemental à the receiver o | nnual report is r trustee empo | true a wered | nd accu | irate and | that my | / signatur | e shall have | the same ler | pal effect a | as if made i | under oath: that |
| appears | In Block 12 or Block 13 if changed, or | on an attachr | neni with an ac | raress | | | | | | | | | |