

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT

1996



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

APPROVED  
AND  
FILED

96 DEC 13 AM 11:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DOCUMENT # L35549 (9)

1. Corporation Name

WOLFOX, INC.

1996 REINSTATEMENT

Principal Place of Business

Mailing Address

% FRANKLIN D. GREENMAN  
5800 OVERSEAS HIGHWAY SUITE 40  
MARATHON FL 33050

% FRANKLIN D. GREENMAN  
5800 OVERSEAS HIGHWAY SUITE 40  
MARATHON FL 33050

3. Date Incorporated or Qualified 12/11/1989	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0179276	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GREENMAN, FRANKLIN D  
5800 OVERSEAS HIGHWAY  
SUITE 40  
MARATHON FL FL 33050

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

*Franklin D. Greenman*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORDAN, LAWRENCE B.	1.2 NAME	
STREET ADDRESS	6175 N. HARBOR CITY BLVD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE FL	1.4 CITY - ST - ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORDAN, KAREN R.	2.2 NAME	
STREET ADDRESS	6175 N. HARBOR CITY BLVD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE FL	2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Lawrence B. Jordan* LAWRENCE B. JORDAN

DATE

10-18-96

Daytime Phone

407-254 3199

**GREENMAN & MANZ**  
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS  
ATTORNEYS AT LAW

Franklin D. Greenman, P.A.  
David L. Manz, P.A.\*  
\*Board Certified in Marital & Family Law

Gulfside Village, Suite 40  
5800 Overseas Highway  
Marathon, FL 33050  
(305) 743-2351  
(305) 743-6523 Fax

November 13, 1996

Larry Jordan  
6175 North Harbor City Blvd.  
Melbourne, FL 32940

RE: WOLFOX, INC.  
Our File No: 96-08

Dear Mr. and Mrs. Jordan:

Enclosed please find the letter I received from the Florida Department of State regarding your corporation. While I have no objection to remaining as your Registered Agent the inconvenience of it would warrant a change. A Resident Agent is a person who can accept service of process (legal notices) and other official correspondence from the Secretary of State. The Resident Agent's office must be open from 10:00 to 12:00 of every work day. There is no requirement that a Registered Agent be a lawyer. In light of the fact that you now live in Brevard County it would be my recommendation that you scratch out my name, type in yours, or the attorney who represents you in Brevard County and that address, sign the document where indicated and return it to the Secretary of State's office. I believe that would meet your corporate needs and provide the necessary convenience and fast response that such an official notification may require.

As always, if you wish to discuss this with me, please do not hesitate to call.

Respectfully,

  
Franklin D. Greenman

FDG/zf  
Enclosure