

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L78312 (0)

1. Corporation Name

WINGER MARKETING, INC.



Principal Place of Business

Mailing Address

1449 E. 29TH ST.
SANFORD FL 32773

1449 E. 29TH ST.
SANFORD FL 32773

3. Date Incorporated or Qualified

06/04/1990

3a. Date of Last Report

02/06/1995

2. Principal Place of Business

2a. Mailing Address

21 2735 Mellonville Ave

26 2735 Mellonville Ave.

4. FEI Number

59-3016496

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite # 202

Suite, Apt. #, etc.

27 Suite # 202.

5. Certificate of Status Desired

☐ \$8.75 Additional

Fee Required

City & State

23 Sanford FL

City & State

28 Sanford FL

6. Election Campaign Financing

☐ \$5.00 May Be

Added to Fees

Zip

24 32773

Country

25 USA

Zip

29 32773

Country

30 USA.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WINGER, TERRY LEE
1449 EAST 29TH ST.
SANFORD FL 32773

81 Name

WINGER, Terry Lee.

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

2735 Mellonville Ave.

83

Suite 202

84

Sanford

FL

85 Zip Code

32773

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

Terry L. Winger

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-25-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME WINGER, TERRY LEE
STREET ADDRESS 1449 E. 29TH ST.
CITY-ST-ZIP SANFORD FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PRESIDENT

WINGER, Terry Lee
2735 Mellonville Ave, STE 202
Sanford FL 32773

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Terry L. Winger

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)