

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

CORPORATION  
ANNUAL REPORT  
**1995**



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

APPROVED  
AND  
FILED

95 APR 28 AM 10:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # M78230 (3)**

1. Corporation Name  
**MWB, INC.**

Principal Place of Business

% LEO WOTITZKY  
201 W. MARION AVE., STE. 301  
PUNTA GORDA FL 33950

Mailing Address

% LEO WOTITZKY  
201 W. MARION AVE., STE. 301  
PUNTA GORDA FL 33950

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**04/27/1988**

3a. Date of Last Report

**06/20/1994**

4. FEI Number

**65-0045615**

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

7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WOTITZKY, LEO  
201 W. MARION AVE.  
SUITE 301  
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent

81 Name

**MARIAN W. BANDLER**

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

83

**1640 BAY VIEW DRIVE**

84 City

**SARASOTA**

FL

85 Zip Code

**34239**

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 607.0405, Florida Statutes.

SIGNATURE

*Marian W. Bandler*

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

(NOTE: Registered Agent signature required when resigning)

DATE

**4-23-95**

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

**BANDLER, MARIAN W.**

STREET ADDRESS

**26145 MADRAS COURT**

CITY - ST - ZIP

**PUNTA GORDA FL**

TITLE

VP

NAME

**BANDLER, STEVEN**

STREET ADDRESS

**5258 BLACKJACK CIRCLE**

CITY - ST - ZIP

**PUNTA GORDA FL**

TITLE

T

NAME

**BARNER, AMY**

STREET ADDRESS

**26145 MADRAS CT.**

CITY - ST - ZIP

**PUNTA GORDA FL**

TITLE

S

NAME

**BANDLER, DAWN**

STREET ADDRESS

**5258 BLACKJACK CIRCLE**

CITY - ST - ZIP

**PUNTA GORDA FL**

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

DP

1.2 NAME

**BANDLER MARIAN W.**

1.3 STREET ADDRESS

**1640 BAY VIEW DR.**

1.4 CITY - ST - ZIP

**SARASOTA FL 34239**

2.1 TITLE

2.2 NAME

*same*

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

**AMY, BANDLER AMY**

3.3 STREET ADDRESS

**3611 WARMSRING WAY**

3.4 CITY - ST - ZIP

**VALRICO, FL. 33594**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**DELETE**

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 110.07(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:

*Marian W. Bandler*

**MARIAN W. BANDLER**

**4-2-95**

**813-453-2842**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number