## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## PWFCID, INCORPORATED

N93000005803 (2) DOCUMENT #

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Principal Plac	e of Business	Malling Address				1 12 Dittell ein felen biete Cater auf in batte abeit abeit abeit anter abeit
1048 ENNISON GREEN COVE	ST Springs FL 32043	1048 ENNISON ST Green Cove Springs FL 32043				3. Date Incorporated or Qualified 12/30/1993
3666 SHA	NNON . STREET	2666 SHANNON STREET				4. FEI Number Applied For
ORANE PA	RK,FL 32065	ORANGE PARK, FL 32065			65	59-3290602 Not Applicable
2. Principal P	lace of Business	28. Mailing Address 28. 2666 SHANNO	NI C'	יסשפי	——— Т	5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apl.	HANNON STREET	Suite, Apt. #, etc.	N D.	IKEE	<u>+</u>	
<del></del>	#, <del>0</del> (¢.	<del></del>				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees
City & Stat	Δ	City & State				7. Is this nonprofit corporation a homeowners association?
<del>-</del>	E PARK, FL	28 ORANGE PARK, FL				7. Is this nonprofit corporation a noneowners association?
Zip	Country COUNTY	Zip			COUNT	
	<b>—</b>	29 32065	30	CLA		Personal Property Tax due June 30. Personal Property Tax due June 30. Yes No
32965	25 CLAY  9. Name and Address of Current		190	CLA	ī	10. Name and Address of New Registered Agent
	9, Name and Address of Carrent	nogistorou Agent		81	Name	TO, Falling Disc Floor
				"	1481110	
	, MATTHEW JR				Street Ac	ddress (P.O. Box Number) N (A) (6) (20) 44 4 8 2 3 5 3
1048 EN	INISON ST					-03/05/9801069003
GREEN	COVE SPRINGS FL 32043			83		*****61.25 *****61.25
		•		84	City	SE Zin Code
					•	FL [ ]
SIGNATURE	Roosevelt Paige Signature, sport or printed name of registered agent	and tille if applicable. (NO	E: Regis	slered Apo		orporation submits this statement for the purpose of changing its registered cration's board of directors. I hereby accept the appointment as registered accept the appointment as registered.  DATE  ADDITIONS AND DIRECTORS IF LS
12.	OFFICERS AND			13.		
TITLE	D	DELETE		.1 TITLE		FAIRICK ANWINE
NAME	WELCH, ROBERT H.		١ '	.2 NAME	, ,	2624 SHOPRSBURG COURT
STREET ADDRESS	3001 NAUTILUS RD		١.	.3 STREET	Abdress N	MIDDLEBURG, FLORIDA
CITY-S1-ZIP	MIDDLEBURG FL			.4 CITY-S	T-ZIP	
TITLE	ST	☐ DELETE	2	.i TITLE		Change
NAME	HAMPSHIRE, FELECIA		2	2 NAME		
STREET ADDRESS	508 FRANKLIN ST		1 2	.a street	ADDRESS	:
CITY-ST-ZIP	GREEN COVE SPRINGS FL		,	2. 4 CITY-5	ST-21P	•
: TITLE	C	DELETE		.1 THILE		Change Addition
- NAME	HENRY, MICHAEL	<b></b>		.2 NAME	ŀ	
	703 MILL ST				ADDRESS	
STREET ADDRESS	GREEN COVE SPRINGS FL					
CITY-ST-ZIP	T T T T T T T T T T T T T T T T T T T	☐ DELETE	_	.4. CITY - 5	DI-ZIP	Change Addition
TITLE	DATELEO CUADIFO	ר הנרנים		I TITLE		
NAME	BATTLES, CHARLES			i. 2 NAME		
STREET ADDRESS	407 PALM ST	44	- 14	I.3 STREET	ADDRESS	,
CITY-ST-ZIP	GREEN COVE SPRINGS FL 32			14 CITY-S	17 - ZIP	
TITLE	T	DELETE	5	S.1 TALE		Change Addition
NAME	DOUGLAS, FRED		5	3.2 NAME		
STREET ADDRESS	PO 80X 742 N/A		5	.3 STREET	ADDRESS	
CITY-ST-ZIE	GREEN COVE SPRINGS FL 32	043	9	6.4 CITY-S	T-ZIP	
TITLE		X DELETE		.1 TITLE		CLARENCE HAMPSHIRE Change Addition
NAME	JOHNSON, ROBERT			3.2 NAME		508 FRANKLIN STREET
STREET ADDRESS	417 SHANNON ST				_	- 1 NV 1 1
OITV.CT.7ID	GREEN COVE SPRINGS FL 32	PAG		BINECI LA CITY C	١٠	GREEN COVE SPRINGS, FL 32043
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14. Thereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

ROOSEVELT PAIGE

1-16-98