

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000109816

FILED  
Apr 19, 2005  
Secretary of State

Entity Name: WEYAND FAMILY INVESTMENTS, INC.

## Current Principal Place of Business:

2801 EAST HILLSBOROUGH AVENUE  
TAMPA, FL 33610

## New Principal Place of Business:

## Current Mailing Address:

2801 EAST HILLSBOROUGH AVENUE  
TAMPA, FL 33610

## New Mailing Address:

FEI Number: 59-3690451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITTEMORE, DONALD H  
400 NORTH TAMPA STREET  
SUITE 2630  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WEYAND, LAWRENCE R III  
Address: POST OFFICE BOX 11456  
City-St-Zip: TAMPA, FL 33680

Title: D ( ) Delete  
Name: MCPHILLIPS, KATHRYN E  
Address: POST OFFICE BOX 11456  
City-St-Zip: TAMPA, FL 33680

Title: D ( ) Delete  
Name: WEYAND, WILLIAM M  
Address: POST OFFICE BOX 11456  
City-St-Zip: TAMPA, FL 33680

Title: D ( ) Delete  
Name: WEYAND, RICHARD A  
Address: POST OFFICE BOX 11456  
City-St-Zip: TAMPA, FL 33680

Title: D ( ) Delete  
Name: LYLE, MARY A  
Address: POST OFFICE BOX 11456  
City-St-Zip: TAMPA, FL 33680

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD WEYAND

D

04/19/2005

Electronic Signature of Signing Officer or Director

Date