


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 16, 2004 08:00 AM
Secretary of State**

DOCUMENT # P01000012273 1. Entity Name W.F.D., INC.	
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Principal Place of Business
14221 CLUB HOUSE DR.
BOKEELIA, FL 33922

Mailing Address
14221 CLUB HOUSE DR.
BOKEELIA, FL 33922



01142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1069284	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DAVIS, WILLIAM F
14221 CLUB HOUSE DR.
BOKEELIA, FL 33922

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, WILLIAM F 14221 CLUB HOUSE DR. BOKEELIA, FL 33922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DAVIS, RITA K 14221 CLUB HOUSE DR. BOKEELIA, FL 33922
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01/16/04-80028-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William F Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/04
Date

239-282-5778
Daytime Phone #

CK # 1135