

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068997

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: JW WOLF, INC.

**Current Principal Place of Business:**

81 DUNBAR ROAD EAST  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

3910 RCA BLVD SUITE 1015  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 65-1143214      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PODESTA, CARL A P. A.  
11382 PROSPERITY FARMS RD. SUITE 228  
PALM BEACH GARDENS, FL 33410 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: BIEDERWOLF, JOHN W  
Address: 81 DUNBAR ROAD EAST  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VD  
Name: BIEDERWOLF, CAROL R  
Address: 81 DUNBAR ROAD EAST  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VD  
Name: BIEDERWOLF III, JOHN W  
Address: 310 JUPITER WOODS DR.  
City-St-Zip: JUPITER, FL 33458 US

Title: VD  
Name: BIEDERWOLF, RICHARD A  
Address: 213 SEDONA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VD  
Name: BIEDERWOLF, JEFFREY S  
Address: 214 S.W. 38TH PLACE  
City-St-Zip: CAPE CORAL, FL 33991 US

I hereby 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 all other like empowered.

SIGNATURE: JOHN BIEDERWOLF

VP

04/30/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date