

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000124241

1. Entity Name
CWF CONSULTING & ASSOCIATES, INC.



Principal Place of Business
8352 INNSBROOK DRIVE
TALLAHASSEE, FL 32312

Mailing Address
8352 INNSBROOK DRIVE
TALLAHASSEE, FL 32312

FILED

04 APR 12 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04122004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3768318

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FREEBERG, C. WAYNE
8352 INNSBROOK DRIVE
TALLAHASSEE, FL 32312

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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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	P
NAME	FREEBERG, C. WAYNE
STREET ADDRESS	8352 INNSBROOK DRIVE
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	ST
NAME	LEE, EARLE E
STREET ADDRESS	41 N 20TH STREET #17
CITY-ST-ZIP	HAINES CITY, FL 338444638
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

300033721973

04/23/04--01022--008 **150.00

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IN THIS SPACE

12. I hereby 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 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:

Chadway Freeberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/04

Date

(850) 297-1984

Daytime Phone #

TR