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Feb 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P12837

(1)

1. Corporation Name

WIGAND CORPORATION



Principal Place of Business

Mailing Address

850 ELKTON DRIVE
COLORADO SPRINGS CO 80907

850 ELKTON DRIVE
COLORADO SPRINGS CO 80907-3521

3. Date Incorporated or Qualified

12/31/1986

3a. Date of Last Report

03/04/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	WIGAND, EMERIC JR.	
STREET ADDRESS	850 ELKTON DRIVE	
CITY - ST - ZIP	COLORADO SPRINGS CO	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	WIGAND, ERIC	
STREET ADDRESS	850 ELKTON DRIVE	
CITY - ST - ZIP	COLORADO SPRINGS CO	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	JOHNSON, DELROY	
STREET ADDRESS	850 ELKTON DRIVE	
CITY - ST - ZIP	COLORADO SPRINGS CO	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ALWYN ROUGIER-CHAPMAN	
STREET ADDRESS	901 44TH STREET	
CITY - ST - ZIP	GRAND RAPIDS MI	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	WIGAND, REINHOLD	
STREET ADDRESS	850 ELKTON DR.	
CITY - ST - ZIP	COLORADO SPRINGS CO	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FAULB, JARED	
STREET ADDRESS	850 ELKTON DR	
CITY - ST - ZIP	COLORADO SPRINGS FO	

11 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	BRYANT, DARRYL	
13 STREET ADDRESS	850 ELKTON DRIVE	
14 CITY - ST - ZIP	COLORADO SPRINGS, CO 80907	
21 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	MICHAEL TISCHNER	
23 STREET ADDRESS	850 ELKTON DRIVE	
24 CITY - ST - ZIP	COLORADO SPRINGS, CO 80907	
31 TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	JOHNSON, DELROY	
33 STREET ADDRESS	850 ELKTON DRIVE	
34 CITY - ST - ZIP	COLORADO SPRINGS, CO 80907	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	GUTHRIE, GARY	
53 STREET ADDRESS	850 ELKTON DRIVE	
54 CITY - ST - ZIP	COLORADO SPRINGS, CO 80907	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do 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 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEC/TREAS/DIR

2/13/97 (719)599-8887

Date

Daytime Phone

0607736

CR2E034 (9/96)