

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90282 014 ***150.00

DOCUMENT # **P 23555**

1. Corporation Name
Wade-Trim/Associates, Inc.

Principal Place of Business
25251 Northline Rd.
PO Box 10
Taylor, MI 48180

Mailing Address
same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business
21 25251 Northline Road
Suite, Apt. #, etc.

2a. Mailing Address
26 PO Box 10
Suite, Apt. #, etc.

4. FEI Number
38-1802386

Applied For
Not Applicable

22 City & State
23 Taylor, MI

27 City & State

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

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

24 Zip Country
48180 25 US

29 Zip Country
30

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

David Gildersleeve
4919 Memorial Highway
Suite 200
Tampa, FL 33624

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, 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 President/CEO ☐ DELETE
NAME Douglas Watson
STREET ADDRESS 25251 Northline Road, PO Box 10
CITY-ST-ZIP Taylor, MI 48180

1.1 TITLE Senior Vice President ☐ Change ☐ Addition
1.2 NAME Jeffrey Trim
1.3 STREET ADDRESS 4919 Memorial Hwy., Suite 200
1.4 CITY-ST-ZIP Tampa, FL 33624

TITLE Treasurer/CAO ☐ DELETE
NAME Donald Zdyrski
STREET ADDRESS 25251 Northline Road, PO Box 10
CITY-ST-ZIP Taylor, MI 48180

2.1 TITLE Vice President ☐ Change ☐ Addition
2.2 NAME David Anthony
2.3 STREET ADDRESS 4919 Memorial Hwy., Suite 200
2.4 CITY-ST-ZIP Tampa, FL 33624

TITLE Executive Vice President ☐ DELETE
NAME Frank Tymowski
STREET ADDRESS 25251 Northline Road, PO Box 10
CITY-ST-ZIP Taylor, MI 48180

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE Executive Vice President ☐ DELETE
NAME Douglas Dail
STREET ADDRESS 25251 Northline Road, PO Box 10
CITY-ST-ZIP Taylor, MI 48180

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE Executive Vice President ☐ DELETE
NAME Herbert Lamkin
STREET ADDRESS 25251 Northline Road, PO Box 10
CITY-ST-ZIP Taylor, MI 48180

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE Secretary & Sr. Vice Pres. ☐ DELETE
NAME David Gildersleeve
STREET ADDRESS 4919 Memorial Hwy. Suite 200
CITY-ST-ZIP Tampa, FL 33624

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 (734) 947-9700
Date Daytime Phone #

CR2E034 (11/98)