

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 02 1997 8:00am  
Secretary of State

DOCUMENT # P31243

(9)

1. Corporation Name

BIG W OF FLORIDA, INC.

Principal Place of Business

6452 N.W. 5TH WAY  
FT. LAUDERDALE FL 33309  
US

Mailing Address

6301 WATERFORD BLVD.  
PO BOX 26647  
OKLAHOMA CITY OK 73126-0647  
US

3. Date Incorporated or Qualified

10/09/1990

3a. Date of Last Report

03/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65-0218815

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
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, 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 P ☒ DELETE

NAME FARELLO, THOMAS A  
STREET ADDRESS 6452 N.W. 5TH WAY  
CITY - ST - ZIP FT. LAUDERDALE FL 33309

1.1 TITLE P ☐ Change ☒ Addition

1.2 NAME Lehto, Steven A  
1.3 STREET ADDRESS 6452 NW 5th Way  
1.4 CITY - ST - ZIP Ft. Lauderdale, FL 33309

TITLE VC ☐ DELETE

NAME MOORE, LOUIS F  
STREET ADDRESS 6452 N.W. 5TH WAY  
CITY - ST - ZIP FT. LAUDERDALE FL 33309

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE VSD ☐ DELETE

NAME ALMOND, DAVID R  
STREET ADDRESS 6301 WATERFORD BLVD  
CITY - ST - ZIP OKLAHOMA CITY OK

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

TITLE V ☐ DELETE

NAME SMITH, ROBERT W  
STREET ADDRESS 6301 WATERFORD BLVD.  
CITY - ST - ZIP OKLAHOMA CITY OK 73118

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

TITLE VTAS ☐ DELETE

NAME THOMPSON, JOHN M  
STREET ADDRESS 6301 WATERFORD BLVD.  
CITY - ST - ZIP OKLAHOMA CITY OK 73118

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

TITLE V ☐ DELETE

NAME QUINN, PAUL J  
STREET ADDRESS 6301 WATERFORD BLVD.  
CITY - ST - ZIP OKLAHOMA CITY OK 73118

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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

4/24/97 405/840-7200  
Date Daytime Phone

CR2E034 (9/96)