

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -7 AM 5:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P31764** (4)

1. Corporation Name
CDWW, INC.

Principal Place of Business Mailing Address
10350 LAKEVIEW DRIVE NEW PORT RICHEY FL 34654

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/15/1990** 3a. Date of Last Report **03/18/1994**

4. FEI Number **59-3028924** 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

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

9. Name and Address of Current Registered Agent

**VANDIVER, MICHAEL R.
10350 LAKEVIEW DRIVE
NEW PORT RICHEY FL 34654**

10. Name and Address of New Registered Agent

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 of office (optional)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	VANDIVER, MICHAEL R.
STREET ADDRESS	10350 LAKEVIEW DRIVE
CITY, ST, ZIP	NEW PORT RICHEY FL
TITLE	STD
NAME	VANDIVER, JOYCE G.
STREET ADDRESS	10350 LAKEVIEW DRIVE
CITY, ST, ZIP	NEW PORT RICHEY FL
TITLE	CD
NAME	DANIELS, CHARLIE
STREET ADDRESS	16850 CENTRAL PIKE
CITY, ST, ZIP	LEBANON TN
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Daniels, Hazel	
1.3 STREET ADDRESS	16850 Central Pike	
1.4 CITY, ST, ZIP	Lebanon, TN 37090	
2.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Garber, Harold	
2.3 STREET ADDRESS	20379 W. Country Club Dr. #1136	
2.4 CITY, ST, ZIP	North Miami, FL 33108	
3.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Heron, Leon	
3.3 STREET ADDRESS	9554 Jockey Club Ln.	
3.4 CITY, ST, ZIP	Brentwood, TN 37027	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and claims not equally for the exemption stated in Section 119 (17C)(8), 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: *Michael R. Vandiver* **PRESIDENT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 09, 1995 813-862-4786
DATE (Typed Please)