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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P34443

CONWAY VAN DER WOLK LIMITED CO.

FILED									
Apr 01 1998 8:00an	n								
Secretary of State									



Principal Place of Business Mailing Address												
206 SEABREEZE AVE 206 SEABREEZE AVE DELRAY BEACH FL 33483 DELRAY BEACH FL 33483				_								
US	VII 1 E 80 TO 9		US	<b>00100</b>				DO NOT WRITE	IN THIS	SPACE		
							3	Date Incorporated or Qualified				
								06/19/1991				
2. Principal F	Place of Busin	ess	2a. Mailing Address				4	, FEI Number		_ <del> </del>	plied For	
21			26					54-1568140			t Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5	i. Certificate of Status Desired		\$8.75 A		
City & Stat	te		City & State				6	. Election Campaign Financing		\$5.00	May Be	
23			28					Trust Fund Contribution		Added t		
Zip		Country	Zip	Cou	Country			I. This corporation owes or has pa	id the cui	rent year Int	angible	
24		25	29	30	50			Personal Property Tax due June 30. Yes No				
	9, Name	and Address of Current	Registered Agent		ļ			), Name and Address of New Re	gistered	Agent		
VA.	N DER WOL	.K. Peter			81	Name	•					
2300 PGA BLVD				82	Street	Address (	P.O. Box Number is Not Acceptat	ole)				
PA	I'M BEACH	GARDENS FL 33410			83				<u> </u>			
					84	City			FL	85 Zip (	Code	
11 Purcuant	to the provisi	one of Sections 607 0503	2 and 607 1508 Florida S	tatutes the a	havi	e-namer	1 corporation	on submits this statement for the p		- 1 1	s registered	
office or I	registered ag	ent, or both, in the State i	of Florida Such change vitions of, Section 607.050	was authorize	d by	/ the cor	poration's	board of directors. I hereby accep	ot the app	ointment as	registered	
SIGNATURE										· · · · · · · · · · · · · · · · · · ·		
	Signature typod	or pointed name of registered ager		(NOTE Registere	d Age	nt signatur	e required who	<del></del>	DATE	DIDECTOR	00 10 1 10	
12.		OFFICERS AND	DELETE	13.	T) F		<del></del>	ADDITIONS/CHANGES TO OFFIC	EHS AINL	Change	Addition	
TITLE	P	DIMONIA COMMAN	- DELETE							C Ottalige	☐ Addition	
NAME	1	R WOLK, CONWAY		1.2 N								
STREET ADDRESS		BREAZE AVE				ADDRESS						
CITY-ST-ZIP	1	BEACH FL	DOLLETT			T-ZIP				Change	Addition	
TITLE	S	A1148180 1	☐ DELETE				5	NO, Charles J. Box 17583 A		L. Grange	L. Audilion	
NAME	BROWN, CHARLES J.				1010V	W 1) CN 01 CC 23	u A					
\$TREET ADDRESS		CAHONTAS AVE				ADDRESS	15.0.	Box 11201 V	າ) ເຸົ້ ັ	. 1	-	
CITY-ST-ZIP	RICHMO	ND VA	DELETE			ST-ZIP	BICK	mand, va s	300	Change	Addition	
TITLE		3 WAW BETER W	L Officie					<b>,</b>		- Ollanike	L_ Addition	
NAME		R WOLK, PETER W.		3.2 N								
STREET ADDRESS	1 -	BREEZE AVE				ADDRESS						
CITY-ST-ZIP	DELKAY	BEACH FL	Drecto			ST-ZIP	<del> </del>		··········	Change	Addition	
TITLE			☐ DELETE							La Citalige		
NAME				4. 2 N							Į.	
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			[ ] or ere			T-ZIP				Change	1 delition	
TITLE			DELETE							☐ Change	☐ Addition	
NAMÉ	1			5.2 N			1					
STREET ADDRESS	[			5.3 S	TREET	ADDRESS						
CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·			T-ZIP	<u> </u>	<del></del>		<del></del>	1000	
TITLE			☐ DELETE	6.1 TI	TLE					Change	☐ Addition	
NAME				6.2 N	AME							
STREET ADDRESS	[			6.3 S	TREET	ADORESS	1					
CITY-ST-ZIP	<u> </u>			6.4 C	TY-S	T-2IP						

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 suppliemental 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 allachment with an address.

(5L1) 276 -