

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 PM 2:35

SECRETARY OF STATE
1000 BANK BUILDING
TALLAHASSEE, FLORIDA

DOCUMENT # P93000005397 (3)

1. Corporation Name

THE WRITE PAPER, INC.

Principal Place of Business

1046 MONTGOMERY RD
ALTAMONTE SPRINGS FL 32714

Mailing Address

1046 MONTGOMERY RD
ALTAMONTE SPRINGS FL 32714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3158791

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 mandatory tax under S. 193 (52),
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. # etc.

State, Apt. # etc.

22

27

City & State

City & State

23

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KRONE, CAROL R
1046 MONTGOMERY RD
ALTAMONTE SPRINGS FL 32714

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 607.001 and 607.002, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in 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 607.003(5)(b), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent in Charge

Signature of New Registered Agent or Registered Agent in Charge

86

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY	STATE	ZIP
12.1 NAME	12.1 STREET ADDRESS	12.1 CITY	12.1 STATE	12.1 ZIP
12.2 NAME	12.2 STREET ADDRESS	12.2 CITY	12.2 STATE	12.2 ZIP
12.3 NAME	12.3 STREET ADDRESS	12.3 CITY	12.3 STATE	12.3 ZIP
12.4 NAME	12.4 STREET ADDRESS	12.4 CITY	12.4 STATE	12.4 ZIP
12.5 NAME	12.5 STREET ADDRESS	12.5 CITY	12.5 STATE	12.5 ZIP
12.6 NAME	12.6 STREET ADDRESS	12.6 CITY	12.6 STATE	12.6 ZIP
12.7 NAME	12.7 STREET ADDRESS	12.7 CITY	12.7 STATE	12.7 ZIP
12.8 NAME	12.8 STREET ADDRESS	12.8 CITY	12.8 STATE	12.8 ZIP
12.9 NAME	12.9 STREET ADDRESS	12.9 CITY	12.9 STATE	12.9 ZIP
12.10 NAME	12.10 STREET ADDRESS	12.10 CITY	12.10 STATE	12.10 ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	STREET ADDRESS	CITY	STATE	ZIP	Change	Addition
13.1 NAME	13.1 STREET ADDRESS	13.1 CITY	13.1 STATE	13.1 ZIP	☐	☐
13.2 NAME	13.2 STREET ADDRESS	13.2 CITY	13.2 STATE	13.2 ZIP	☐	☐
13.3 NAME	13.3 STREET ADDRESS	13.3 CITY	13.3 STATE	13.3 ZIP	☐	☐
13.4 NAME	13.4 STREET ADDRESS	13.4 CITY	13.4 STATE	13.4 ZIP	☐	☐
13.5 NAME	13.5 STREET ADDRESS	13.5 CITY	13.5 STATE	13.5 ZIP	☐	☐
13.6 NAME	13.6 STREET ADDRESS	13.6 CITY	13.6 STATE	13.6 ZIP	☐	☐
13.7 NAME	13.7 STREET ADDRESS	13.7 CITY	13.7 STATE	13.7 ZIP	☐	☐
13.8 NAME	13.8 STREET ADDRESS	13.8 CITY	13.8 STATE	13.8 ZIP	☐	☐
13.9 NAME	13.9 STREET ADDRESS	13.9 CITY	13.9 STATE	13.9 ZIP	☐	☐
13.10 NAME	13.10 STREET ADDRESS	13.10 CITY	13.10 STATE	13.10 ZIP	☐	☐

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that it is true and correct. I further certify that the information included in this annual report or supplemental annual report is true and correct and that this corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or that I am an officer or director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report as an attachment with an address.

SIGNATURE:

Carol R. Krone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95

7/24/95