

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000011167 (2)

1. Corporation Name

WILBAR TWO, INC.



Principal Place of Business

1215 ORANGE AVE.  
WINTER PARK FL 32789

Mailing Address

1215 ORANGE AVE.  
WINTER PARK FL 32789

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

JOHNSON, LORAN A  
215 N. EOLA DR.  
ORLANDO FL 32801

3. Date Incorporated or Qualified

02/12/1993

3a. Date of Last Report

02/08/1995

4. FBI Number

59-3167409

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

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 (Type or printed name of registered agent, if not the principal)

Initials (Type or printed name of registered agent, if not the principal)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPST	<input type="checkbox"/> DELETE
NAME	BELL, JOHN MARTIN	
STREET ADDRESS	1215 ORANGE AVE.	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	PST	<input type="checkbox"/> DELETE
NAME	BELL, JOHN MARTIN	
STREET ADDRESS	1215 ORANGE AVE	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	VP School, <i>omb</i>	<input type="checkbox"/> DELETE
NAME	SCHA, INGRID L.	
STREET ADDRESS	675 OSCEOLA AVENUE <i>Leane</i>	
CITY - ST - ZIP	WINTER PARK FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.1 NAME	
13.1 STREET ADDRESS	
14.1 CITY - ST - ZIP	
21.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22.1 NAME	
23.1 STREET ADDRESS	
24.1 CITY - ST - ZIP	
31.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32.1 NAME	
33.1 STREET ADDRESS	
34.1 CITY - ST - ZIP	
41.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42.1 NAME	
43.1 STREET ADDRESS	
44.1 CITY - ST - ZIP	
51.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52.1 NAME	
53.1 STREET ADDRESS	
54.1 CITY - ST - ZIP	
61.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62.1 NAME	
63.1 STREET ADDRESS	
64.1 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

*John Martin Bell as Pres*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
JOHN MARTIN BELL

*April 26, 1996*  
Date

Phone

CR2E034 (12/95)