

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 2:13

DOCUMENT # P93000015416 (9)

1. Corporation Name

WAUCHULA TOWER LEASING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

**523 HIGHWAY 540
WINTER HAVEN FL 33880**

**523 HIGHWAY 540
WINTER HAVEN FL 33880**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/18/1993

3a. Date of Last Report

04/25/1994

4. FFI Number

59-3187237

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 (32),
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BARKER, HAROLD E ESQ
4315 HIGHLAND PARK BLVD.
SUITE C
LAKELAND FL 33813**

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 (50) and 607 (50B), 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 (50B), Florida Statutes.

SIGNATURE

Signature of Agent, Registered Agent, or Registered Agent in Charge (If the Registered Agent is a corporation, the signature of the officer or director authorized to execute this report is required.)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS #4-12

TITLE	D
NAME	KEATH, DANIEL
STREET ADDRESS	523 HIGHWAY 540
CITY, ST, ZIP	WINTER HAVEN FL 33880
TITLE	ST
NAME	CHILDERS, PAMELA
STREET ADDRESS	1370 SOUTH LAKE ROY DRIVE, SE
CITY, ST, ZIP	WINTER HAVEN FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14 TITLE	☐ Change ☐ Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
18 TITLE	☒ Change ☐ Addition
19 NAME	
20 STREET ADDRESS	21 Heather Lane
21 CITY, ST, ZIP	Winter Haven, FL 33884
22 TITLE	☐ Change ☐ Addition
23 NAME	
24 STREET ADDRESS	
25 CITY, ST, ZIP	
26 TITLE	☐ Change ☐ Addition
27 NAME	
28 STREET ADDRESS	
29 CITY, ST, ZIP	
30 TITLE	☐ Change ☐ Addition
31 NAME	
32 STREET ADDRESS	
33 CITY, ST, ZIP	
34 TITLE	☐ Change ☐ Addition
35 NAME	
36 STREET ADDRESS	
37 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 113 (2)(b), Florida Statutes. I further certify that the information included 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] **P.J. Childers**

4/30/95

Exempt from Fee