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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 05 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

STREET ADDRESS

P93000016336 (8)

WOTTER CYCLE, INC.

Principal Place of Business		Mailing Address				
40 B INDUSTRIAL ST FT WALTON BCH FL 32548		40 B INDUSTRIAL ST FT WALTON BCH FL 32548 US				
US				DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualified	
Oringinal Di	Inne of Dyningon	2a. Mailing Address			02/26/1993 4. FEI Number	Landing For
2. Principal Place of Business 21		26. Walling Address		59-3211562	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	<u> </u>		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Countr		Trust Fund Contribution	Added to Fees
Zip 24	25	Ζιρ <b>29</b>	30	у	This corporation owes or has paid the Personal Property Tax due June 30.	current year intangible
24	9, Name and Address of Curren		1901		10. Name and Address of New Registers	
SPENCER, WILLIAM R JR. 8						
64 21ST STREET			82	Street Ad	dress (P.O. Box Number is Not Acceptable)	
SANTA ROSA BCH FL 32459						
			83	1		
			84	City		85 Zip Code
44 Pure earl to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the shows-named corporation submits this statement for the purpose of changing its redi						
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		·				
4.0	Stonature, typed or pentird name of registered ag	ent and trie if applicable (NO1 ID DIRECTORS		ent signature req	ADDITIONS/CHANGES TO OFFICERS A	
12.	<b>D</b>	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	SPENCER, WILLIAM R JR		1.2 NAME			_ • _
STREET ADDRESS	***************************************		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	ST-ZIP SANTA ROSA BEACH FL 32459		1.4 CITY-	ST-7IP		
TITLE			21 TITLE			Change Addition
NAME	MACARTHY, DALE		2 2 NAME			
STREET ADDRESS	40INDUSTRIAL ST			T ADDRESS		
CITY-ST-ZIP	FT. WALTON BCH FL  DELETE		2 4 CHTY	ST-ZIP		Change Addition
TITLE NAME	BRIDGES, RODNEY		3.2 NAME			
STREET ADDRESS	1432 KINGS RIDGE DR.			T ADDRESS		
CITY-ST-ZIP	NORCROSS GA 30093		3.4. CITY	1		
TITLE	D DELETE		4.1 TITLE			Change Addition
NAME	CONNORS, DAVID		4. 2 NAM			
STREET ADDRESS	40 INDUSTRIAL ST.		4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		Change Addition
TITLE		DELETE.	5.1 TITLE	İ		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.4 CITY-	T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	31-4Ir		☐ Change ☐ Addition
4144			CONAME			· <b>-</b> —

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 supplemental annual report is true and accurate and that my signature shall have the same logal 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.

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP