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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000028184 (8)

W.P. CONSULTANTS & DESIGN GROUP, INC.

Principal Place of Business

Mailing Address

2235 OUEEN ANNS ST.

FILED May 27 1998 8:00am Secretary of State



2235 QUEEN ANNS ST. **MERRITT ISLAND FL 32952** MERRITT ISLAND FL 32952 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3180076 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 ☐ No 25 29 Personal Property Tax due June 30. ☐ Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ludwig, Joseph 81 2235 QUEEN ANN CT. 82 Street Address (P.O. Box Number is Not Acceptable) **MERRITT ISLAND FL 32952** 83 84 City Zin Code 85 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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 607.05.05, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELE TE TITLE 1.1 TITLE LUDWIG, JOSEPH A NAME 1.2 NAME 2235 QUEEN ANN ST STREET ADDRESS 1.3 STREET ADDRESS MERRITT ISLAND FL 32952 CHTY-ST-ZIP 14 CITY-ST-7IP DELFTE TITLE Change Addition 21 TITLE LUDWIG, REBECCA NAME 22 NAME 2235 QUENN ANN ST STREET ADDRESS 2.3 STREET ADDRESS MERRITT ISLAND FL 32952 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELFTE TITLE 3.1 TITLE Change Addition NAME 3.2 NAM8 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY- ST- ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETÉ Change TITLE Addition 5.1 HILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-ZIP DELETE TITLE 61 THLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-\$T-ZIP 6.4 CITY-S1-ZIP

14. Thereby 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 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 8/90/98