FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 13 AM 11:45

DOCUMENT # P93000031850 (9)

1. Corporation Name
WEBB COLE ENTERPRISES, INC.

Principal Place of Business	Mailing Address
1405 GREEN COVE RD WINTER PARK FL 32789 US	1405 GREEN COVE RD WINTER PARK FL 32789 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/30/1993
3a. Date of Last Report: 04/18/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
Zip — 24
Country — 25
Zip — 29
Country — 30

4. FEI Number: 65-0430633 ☐ 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

9. Name and Address of Current Registered Agent

FARMER, RICHARD A.
1405 GREEN COVE RD
WINTER PARK FL 32789

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstated)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☒ Change ☐ Addition
NAME	BROWN, STEPHEN W	12 NAME		
STREET ADDRESS	1600 S ORANGE AVE	13 STREET ADDRESS	901 Kensington Garden Court	
CITY-ST-ZIP	SANFORD FL	14 CITY-ST-ZIP	Oviedo, FL 32765	
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	FARMER, RICHARD A	22 NAME		
STREET ADDRESS	1405 GREEN COVE RD	23 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL	24 CITY-ST-ZIP		
TITLE	TD	31 TITLE		☒ Change ☐ Addition
NAME	JOYCE, MICHAEL G	32 NAME		
STREET ADDRESS	1300 S DIXIE HWY	33 STREET ADDRESS	5940 Granada Blvd.	
CITY-ST-ZIP	MIAMI FL 33146	34 CITY-ST-ZIP	Coral Gables, FL 33146	
TITLE	SD	41 TITLE		☒ Change ☐ Addition
NAME	WYATT, CATHERINE L	42 NAME		
STREET ADDRESS	1300 S DIXIE HWY	43 STREET ADDRESS	730 Rosalie Way	
CITY-ST-ZIP	MIAMI FL 33146	44 CITY-ST-ZIP	Winter Springs, FL 32708	
TITLE	D	51 TITLE		☒ Change ☐ Addition
NAME	DAVIDSON, W H	52 NAME		
STREET ADDRESS	1300 S DIXIE HWY	53 STREET ADDRESS	4536 San Amaro Drive	
CITY-ST-ZIP	MIAMI FL 33146	54 CITY-ST-ZIP	Coral Gables, FL 33146	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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.

SIGNATURE: Richard Farmer 2/8/95 401-671-9151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040071 CP