FILE NOW: FILING FEE AFTER MAY 1 IS $ 25.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTME[...] OF STATE
Sandra B. M[...]
Secretary of [...]
DIVISION OF CORP[...]TIONS

DOCUMENT # P93000047063 (1)

1. Corporation Name
W W SERVICES, INC.

Principal Place of Business
13350 STATE RD. 574 WEST
DOVER FL 33527

Mailing Address
P.O. BOX 800
DOVER FL 33527
US

3. Date Incorporated or Qualified: 07/06/1993
3a. Date of Last Report: 05/01/1995

4. FEI Number: 59-3244150 — ☐ 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

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

9. Name and Address of Current Registered Agent

WALDRON, RONALD L
13350 STATE RD. 574 WEST
DOVER FL 33527

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] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: WALDRON, RONALD L STREET ADDRESS: 13350 S.R. 574 WEST CITY-ST-ZIP: DOVER FL 33527	☐ DELETE	☐ Change ☐ Addition
TITLE: D NAME: JENKINS, ROBERT E STREET ADDRESS: 13350 S.R. 574 WEST CITY-ST-ZIP: DOVER FL 33527	☐ DELETE	☐ Change ☐ Addition
TITLE: D NAME: HENDRIX, RICHARD A STREET ADDRESS: 13350 STATE RD. 574 WEST CITY-ST-ZIP: DOVER FL	☑ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition

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: [signature] R Lonny Waldron — 2-7-96 — (813) 659-0206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)