

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:41

DOCUMENT # P93000055726 (2)

1. Corporation Name

WALDRON ENTERPRISES, INC.

Principal Place of Business

**2511 SW 2ND AVENUE
FORT LAUDERDALE FL 33315**

Mailing Address

**2511 SW 2ND AVENUE
FORT LAUDERDALE FL 33315**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/04/1993

3a. Date of Last Report

03/01/1994

4. FEI Number

65-0432821

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

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MORRISON, STEPHEN B
2511 S.W. 2ND AVE.
FORT LAUDERDALE FL 33315**

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD
NAME	WALDRON, GARY
STREET ADDRESS	2511 SW 2ND AVENUE
CITY - ST - ZIP	FORT LAUDERDALE FL
TITLE	D
NAME	WALDRON, DON
STREET ADDRESS	2511 S.W. 2ND AVE.
CITY - ST - ZIP	FORT LAUDERDALE FL
TITLE	PD
NAME	MORRISON, STEPHEN B
STREET ADDRESS	2511 S.W. 2ND AVE.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	VP
NAME	GREEN, DANIEL T
STREET ADDRESS	2511 S.W. 2ND AVE.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	ST
NAME	WOOD, G. M
STREET ADDRESS	2511 S.W. 2ND AVE.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	AST
NAME	KANNALY, SHIRLEY A
STREET ADDRESS	2511 S.W. 2ND AVE.
CITY - ST - ZIP	FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
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 110.07(3)(b), 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, unchanged, or on an attachment with an address.

SIGNATURE:

Gary Waldron
GARY WALDRON

(Signature and Title of Registered Agent or Director)

03-48-95 305-523-1080

(Date)

(Typed Name)