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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE.

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # **P93000073508 (2)**  
1. Corporation Name  
**VIRGIL WAYNE, INC.**

Principal Place of Business      Mailing Address  
11327 SE 62ND AVE.  
BELLEVUE FL 34420  
US  
12091 S.E. 60TH AVENUE ROAD  
BELLEVUE FL 34420

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

3. Date Incorporated or Qualified      3a. Date of Last Report  
**10/18/1993**      **04/06/1994**  
4. FEI Number      Applied For  
**59-3208442**      Not Applicable  
5. Certificate of Status Desired       **\$8.75** Additional  
Fee Required  
6. Election Campaign Financing       **\$5.00** May Be  
Trust Fund Contribution      Added to Fees  
7. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes       Yes       No

9. Name and Address of Current Registered Agent  
**WAYNE, VIRGIL V.  
12091 SE 60TH AVE. RD.  
BELLEVUE FL 34420**

10. Name and Address of New Registered Agent  
81 Name      **Alice Wayne**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**12091 S.E. 60th Ave. Rd.**  
83  
84 City      **Belleview**      FL      85 Zip Code  
**34420**

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 *Alice L. Wayne* **Alice L. Wayne**      **5-5-95**  
(Signature, typed or printed name of registered agent and title if applicable)      (NOTE: Registered Agent signature required when registering)      DATE

12. OFFICERS AND DIRECTORS	
TITLE	<b>DPT</b>
NAME	<b>WAYNE, VIRGIL V</b>
STREET ADDRESS	<b>12091 S.E. 60TH AVE ROAD</b>
CITY - ST - ZIP	<b>BELLEVIEW FL</b>
TITLE	<b>VS</b>
NAME	<b>WAYNE, ALICE L.</b>
STREET ADDRESS	<b>12091 SE 60TH AVE RD</b>
CITY - ST - ZIP	<b>BELLEVIEW FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<b>PTS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>Wayne, Alice L.</b>
13 STREET ADDRESS	<b>12091 S.E. 60th Ave. Road</b>
14 CITY - ST - ZIP	<b>Belleview, FL.</b>
21 TITLE	<b>V</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>Smith, Dayton</b>
23 STREET ADDRESS	<b>P.O. Box 2354 N/A</b>
24 CITY - ST - ZIP	<b>Belleview, FL.</b>
31 TITLE	<b>V</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>Lacy, Herbert</b>
33 STREET ADDRESS	<b>10612 N. Rousseau Drive</b>
34 CITY - ST - ZIP	<b>Dunnellon, FL.</b>
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	
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 119.07(3)(a), 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 13 or 13 if changed, or in an attachment with an address.

SIGNATURE: *Alice L. Wayne* **Alice L. Wayne**      **4-20-95**      **245-4524**  
(Signature, typed or printed name of signing officer or director)      Date      (Typed Phone #)