

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90190 022 ***150.00

DOCUMENT # P93000079779

1. Corporation Name

WONDERWOOD CORPORATION

Principal Place of Business

1745 GLENWOOD RD.
DELAND FL 32720

Mailing Address

1745 GLENWOOD RD.
DELAND FL 32720

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/15/1993

4. FEI Number

59-3214941

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 1525 Langley Ave
Suite, Apt. #, etc.

2a. Mailing Address

26 1525 Langley Ave
Suite, Apt. #, etc.

City & State

23 Deland FL

City & State

28 Deland FL

Zip

24 32724 Country USA

Zip

29 32724 Country USA

9. Name and Address of Current Registered Agent

HURSTON, ED
1745 GLENWOOD RD.
DELAND FL 32720

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2321 E. New York Ave.

83

84 City

FL

85 Zip Code

32724

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 reinstating)

2/5/99

DATE

12.

OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE

NAME HURSTON, ED
STREET ADDRESS 1745 GLENWOOD RD.
CITY-ST-ZIP DELAND FL

TITLE SVD ☐ DELETE

NAME HURSTON, JOAN
STREET ADDRESS 1745 GLENWOOD RD
CITY-ST-ZIP DELAND FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2321 E. New York Ave.
Deland, FL 32724

2.1 TITLE

☒ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2321 E. New York Ave.
Deland, FL 32724

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Katherine Harris) 2/5/99 (904) 734-0397

Date

Daytime Phone #

CR2E034 (1/98)