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

PROFIT: " CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000032737 (6)

W. J. BAUER INCORPORATED

Principal Place of Business

Mailing Address

## **FILED** May 11 1998 8:00am Secretary of State



1500 W. FAIRBANKS WINTER PARK FL 32541 US		POB 1659 Destin FL 32540-1659		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 04/27/1994		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	0 W. Fairbanks	26		59-3253275	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		Continuate of Status Desired	Fee Required	
City & State 23 Wint	t <b>er</b> Park, FL	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	urrent year Intangible	
24 32	<b>789</b> 25 US	29	30	Personal Property Tax due June 30.	☐ Yes ☐ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
NRAI SERVICES, IN. 81 Name				e		
528 E. PARK AVE			82 Stree	ot Address (P.O. Box Number is Not Acceptable)		
STE 105 TALLAMASSEE EL 32301					····	
TALLAHASSEE FL 32301						
			84 City	F.	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 plinted name of registered again	Land life if anolicable (NO)	IF Registered Apont signal	are required when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	P	☐ DELE <b>te</b>	1.1 TITLE	P/T	Change Addition	
NAME	FERRILL, CLAYTON		1.2 NAME	Ferrill, Clayton		
STREET ADDRESS	1019 EAST ALTAMONTE DRIVI		1.3 STREET ADDRESS			
CITY-ST-ZIP	ALTAMONTE SPRINGS FL		1.4 CITY-ST-ZIP	Winter Park, FL 3278	39	
TITLE	I	XX DELETE	2.1 TITLE	S/D	Change XX Addition	
NAME	CHRISTENSEN, MARY G.	na1814	2.2 NAME	Modlin, Kimberly S.		
STREET ADDRESS	20011 EMERALD COAST HIGH	WAY	2.3 STREET ADDRESS		kwy	
CITY-ST-ZIP	DESTIN FL		2.4 CITY-ST-ZIP	Destin, FL 32541		
TITLE	D	XX DELETE	3.1 TITLE		Change Addition	
NAME	CHRISTENSEN, ROBERT L.	*****	3.2 NAME			
STREET ADDRESS	20011 EMERALD COAST HIGH	WAY	3.3 STREET ADDRESS	; <b> </b>		
CITY-ST-ZIP	DESTIN FL	··	3 4. CITY-ST-ZIP			
TITLE	D SAPISO OUADISO S	XX DELETE	4.1 TIYLE		Change Addition	
NAME	EARLES, CHARLES E.	1141417	4. 2 NAME			
STREET ADDRESS	20011 EMERALD COAST HIGH	WAY	4.3 STREET ADDRESS			
CITY-ST-ZIP	DESTIN FL	- 5-1	4.4 CITY-ST-ZIP			
TITLE	<u> </u>	XX DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	TRESSE, HARRY 427 N. 38TH STREET		5.2 NAME			
STREET ADDRESS	WACO TX		5.3 STREET ADDRESS	·		
CITY-ST-ZIP	VP VP	XX DELETE	5.4 CITY-S1-ZIP	<u> </u>	D Ohana D 14490	
TITLE	MORRIS, LARRY	AX DELETE	6.1 1/1LF		☐ Change ☐ Addition	
NAME	2105 SUNNYBROOK		6.2 NAME		Į	
STREET ADDRESS	TYLER TX		6.3 STREET ADDRESS			
CITY-ST-ZIP	TIPEU IV		6.4 CITY - S1 - ZIP			

14. Thereby 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 supplience 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 copporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, in on any itlaching it with a address?