

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

CORPORATION
ANNUAL REPORT
1995



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

**APPROVED
AND
FILED**

95 APR 17 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000032984 (4)**

1. Corporation Name
S.G. & D.W., INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
30 N RING AVE 400 30 N RING AVE 400
TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689

3. Date Incorporated or Qualified 3a. Date of Last Report
04/26/1994

2. Principal Place of Business 2a. Mailing Address

4. FEI Number Applied For
59-3242408 Not Applicable

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22. City & State 27. City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23. Zip County 28. Zip County

8. This corporation has liability for intangibles tax under S. 199.032, Florida Statutes Yes No

24. Zip County 29. Zip County

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KLMS, GEORGE N
30 N RING AVE 400
TARPON SPRINGS FL 34689

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City 85. Zip Code
FL

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 registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	WREN, DEBORAH D
STREET ADDRESS	18640 ARIPEKA RD
CITY - ST - ZIP	ARIPEKA FL 34879
TITLE	D
NAME	GARCIA, SAULO <i>delete</i>
STREET ADDRESS	18640 ARIPEKA RD
CITY - ST - ZIP	ARIPEKA FL 34879
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(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: *Deborah Wren* **Deborah Wren** 4-5-95 813 848 5412

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

19400032984

George N. Klimis, P. A.
Attorney at Law

30 North Ring Avenue, Suite 400
Tarpon Springs, FL 34689
(across from Barnett Bank)

L. L. M. Taxation
Office: (813) 943-9551
FAX: (813) 943-9081

April 10, 1995

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: **Annual Report - S.G. & D.W., Inc.**

Please find enclosed completed 1995 Annual Report for the above referenced corporation. Also enclosed you will find my clients check number 1478 in the amount of \$200.00 required for filing the annual report.

If you have any questions or comments regarding the enclosed, please do not hesitate to contact me.

Sincerely yours,

GEORGE N. KLIMIS, P.A.

By: 

George N. Klimis, Esquire

GNK/mb

Enclosures as referenced above