

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

FILED

Apr 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000037920 (3)**

1. Corporation Name
F.W.G., INC.

Principal Place of Business
**11420 FORTUNE CIRCLE
STE I-24
WEST PALM BEACH FL 33414
US**

Mailing Address
**11420 FORTUNE CIR
SUITE I-24
W PALM BEACH FL 33414
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/16/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0493003	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	DEWINDTON, FL.	28	DEWINDTON, FL.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	29	Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
25	Country	30	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
WITRY, SHARON L 11420 FORTUNE CIRCLE STE I-24 WEST PALM BEACH FL 33414 DEWINDTON				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				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 *Sharon L. Witry*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WITRY, CATHERINE A			1.2 NAME			
STREET ADDRESS	11420 FORTUNE CIR I-24			1.3 STREET ADDRESS			
CITY-ST-ZIP	W PALM BEACH FL			1.4 CITY-ST-ZIP	DEWINDTON, FL		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WITRY, SHARON			2.2 NAME			
STREET ADDRESS	11420 FORTUNE CIR I-24			2.3 STREET ADDRESS			
CITY-ST-ZIP	W PALM BEACH FL			2.4 CITY-ST-ZIP	DEWINDTON, FL.		
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WITRY, JOSEPH D			3.2 NAME			
STREET ADDRESS	11420 FORTUNE CIR I-24			3.3 STREET ADDRESS			
CITY-ST-ZIP	W PALM BEACH FL			3.4 CITY-ST-ZIP	DEWINDTON, FL.		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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.

SIGNATURE *Sharon L. Witry*

CR2E034 (10/97)