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Feb 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000056598 (3)

1. Corporation Name

WAUCHULA OFFICE SUPPLY & PRINTING CO., INC.



Principal Place of Business

102 N. SITH AVE.
WAUCHULA FL 33873

Mailing Address

102 N. SITH AVE.
WAUCHULA FL 33873

2. Principal Place of Business

21 3668 E Main St

Suite, Apt. #, etc.

22 City & State

23 Wauchula FL

24 33873

Country

25 USA

2a. Mailing Address

26 PO Box 1777

Suite, Apt. #, etc.

27 City & State

28 Wauchula FL

Zip

29 33873

Country

30 USA

3. Date Incorporated or Qualified

08/01/1994

3a. Date of Last Report

08/19/1996

4. FEI Number

65-0507821

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

GRIFFIN, DONALD L
RT. 2 BOX 232
WAUCHULA FL 33873

10. Name and Address of New Registered Agent

81 Name

Donald L Griffin

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

3668 E Main St

83

84 City

Wauchula

FL

85 Zip Code
33873

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME GRIFFIN, DONALD L
STREET ADDRESS ROUTE 2, BOX 232
CITY-ST-ZIP WAUCHULA FL 33873

TITLE ☐ DELETE

S
NAME GRIFFIN, KYLEN B
STREET ADDRESS RT. 2 BOX 232
CITY-ST-ZIP WAUCHULA FL 33873

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 President
Donald L Griffin
1.3 STREET ADDRESS 3668 E Main St
1.4 CITY-ST-ZIP Wauchula FL 33873

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Vice-President
Kylen B Griffin
2.3 STREET ADDRESS 3668 E Main St
2.4 CITY-ST-ZIP Wauchula FL 33873

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 do 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: *Kylen B Griffin* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/31

941-773-2118

Daytime Phone #

0524413

CR2E034 (9/96)