

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

PROFIT CORPORATION ANNUAL REPORT 1999



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

FILED
 99 MAR -1 PM 4:28
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P 94000065842

1. Corporation Name
WDDA, Inc.

Principal Place of Business Mailing Address
6111 SW 35 Way Gainesville, FL 32608 / **6111 SW 35 Way Gainesville FL 32608**

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified **9/06/1994**
 4. FIC Number **57-3262270** 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
 7. This corporation owes the current year Intangible Personal Property Tax Yes No
 10 Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
Di Rienzo-Gluhareff, Alexis
6111 SW 35 Way
Gainesville, FL
32608

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83 City
 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 (NOTE: Registered Agent's name and address later in filing) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
	Di Rienzo-Gluhareff, Alexis [DELETE]		
STREET ADDRESS	6111 SW 35 way	13 STREET ADDRESS	
CITY-ST-ZIP	Gainesville, FL 32608	14 CITY-ST-ZIP	
	Demler, Kathy [DELETE]	21 TITLE	
STREET ADDRESS	1547 Bayview	22 NAME	
CITY-ST-ZIP	Sarasota, FL 33579	23 STREET ADDRESS	
		24 CITY-ST-ZIP	
		31 TITLE	
		32 NAME	
		33 STREET ADDRESS	
		34 CITY-ST-ZIP	
		41 TITLE	
		42 NAME	
		43 STREET ADDRESS	
		44 CITY-ST-ZIP	
		51 TITLE	
		52 NAME	
		53 STREET ADDRESS	
		54 CITY-ST-ZIP	
		61 TITLE	
		62 NAME	
		63 STREET ADDRESS	
		64 CITY-ST-ZIP	

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 ****150.00 ****150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 liquidator empowered to execute his 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: **Di Rienzo-Gluhareff, Alexis** 2/25/99 352-373-2022

CR2E034 (11/98)