

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR -7 AM 5:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000067257 (3)

ALVIN WOLCOTT CONSTRUCTION CO. INC.

1. Principal Place of Business: 2552 N ORANGEWOOD ST AVON PARK FL 33825	2a. Mailing Address: 2552 N ORANGEWOOD ST AVON PARK FL 33825
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: 09/13/1994	3a. Date of Last Report: None
4. FEI Number: 65 0514892	Applied For: Not Applicable
5. Certificate of Status Desired: ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing: ☐	\$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: WOLCOTT, ALVIN F 2552 N ORANGEWOOD ST AVON PARK FL 33825

10. Name and Address of New Registered Agent:
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 607.0506, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME		1. NAME	PT ☒ Change ☐ Addition
2. STREET ADDRESS		2. STREET ADDRESS	Alvin F. Wolcott
3. CITY		3. CITY	2552 N. Orangewood St.
4. STATE		4. STATE	Avon Park, FL. 33825
5. ZIP		5. ZIP	
6. NAME		6. NAME	VS ☒ Change ☐ Addition
7. STREET ADDRESS		7. STREET ADDRESS	Judy F. Wolcott
8. CITY		8. CITY	2552 N. Orangewood St.
9. STATE		9. STATE	Avon Park, FL. 33825
10. ZIP		10. ZIP	
11. NAME		11. NAME	☐ Change ☐ Addition
12. STREET ADDRESS		12. STREET ADDRESS	
13. CITY		13. CITY	☐ Change ☐ Addition
14. STATE		14. STATE	
15. ZIP		15. ZIP	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. STREET ADDRESS		17. STREET ADDRESS	
18. CITY		18. CITY	☐ Change ☐ Addition
19. STATE		19. STATE	
20. ZIP		20. ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 11.001(1)(b), Florida Statutes. I further certify that the information included on the annual report or supplemental annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. That I am an officer or director of this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of filers to be changed or on an attachment with an address.

SIGNATURE: *Alvin F. Wolcott* **Alvin F. Wolcott President 2-5-95 813 452 5554**