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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000078779 (3)**

1. Corporation Name

IRON WEDGE INVESTMENTS, INC.

Principal Place of Business	Mailing Address
2408 DIEHL DRIVE TALLAHASSEE FL 32308	2408 DIEHL DRIVE TALLAHASSEE FL 32308

3. Date Incorporated or Qualified: 10/26/1994
3a. Date of Last Report: 05/10/1995

2. Principal Place of Business
21: 5369 APPLEDORE LN.
22: Suite, Apt. #, etc.
23: City & State: TALLAHASSEE, FL.
24: Zip: 32308
25: Country: USA

2a. Mailing Address
26: 5369 APPLEDORE LN.
27: Suite, Apt. #, etc.
28: City & State: TALLAHASSEE, FL.
29: Zip: 32308
30: Country: USA

4. FEI Number: 59-3296472 ☐ 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

PFEIL, JAMES A
2408 DIEHL DRIVE
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name: JAMES A. PFEIL
82 Street Address (P.O. Box Number is Not Acceptable): 5369 APPLEDORE LANE
83:
84 City: TALLAHASSEE FL 85 Zip Code: 32308

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: James A. Pfeil / JAMES A. PFEIL DATE: 6-1-96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PFEIL, JAMES A 2408 DIEHL DRIVE TALLAHASSEE FL 32308	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D JAMES A. PFEIL 5369 APPLEDORE LN. TALLAHASSEE, FL. 32308	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KING, WILLIAM P.O. BOX 2446 N/A THOMASVILLE GA 31792	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RIGGLE, DERRAL 110 S. SYCAMORE THOMASVILLE GA 31792	☑ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

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 119.07(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: James A. Pfeil / JAMES A. PFEIL 6-1-96 904-668-2440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #