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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-7/F

SIGNATURE:

appears in Block 12 or Block 13 if changed or on an attachment with an address



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 06 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400080045 (5)

WRP ACQUISITION COMPANY

Principal Place of Business Mailing Address 200 E NEW ENGLAND AVE 200 E NEW ENGLAND AVE SUITE 301 SUITE 301 WINTER PARK FL 32789 WINTER PARK FL 32789-4341 3. Date Incorporated or Qualified 3a. Date of Last Report 11/01/1994 04/24/1996 2. Principal Place of Business 26. Mailing Address 26. P. O. Box Applied For 59-3369006 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** П Added to Fees B. This corporation has liability for intangible tax under s. 199.032, Yes 🔀 No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SALTSMAN, ROBERT P 200 E NEW ENGLAND AVE Street Address (P.O. Box Number is Not Acceptable) SUITE 301 WINTER PARK FL 32789 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 punted name of registered agent and title if applicable INOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition HANDY, F. PHILIP NAME 1.2 NAME STREET ADDRESS 200 E NEW ENGLAND AVE 1.3 STREET ADDRESS **WINTER PARK FL 32789** CITY - ST - ZIP 1.4 CITY - ST- ZIP DELETE 1016 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7/P 2.4 CITY-\$T-ZIP DELETE HILE ☐ Change 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SI-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-DP 4.4 CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-7:F 5.4 CITY-ST-ZIP DELETE Change 107LF **6.1 TITLE** ☐ Addition NAME 6.2 NAME STREET ADDRESS 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