

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JUL 17 PM 3:02

DOCUMENT # P94000089525 (7)

1. Corporation Name

DWDC, INC.

Principal Place of Business

949 TIMBER GREEN DRIVE
LAKELAND FL 33809

Mailing Address

949 TIMBER GREEN DRIVE
LAKELAND FL 33809

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/09/1994

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

County, Apt. #, etc.

County, Apt. #, etc.

22

City & State

27

City & State

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Country

4. FEI Number

69-3310345

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

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, this 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 607.0602, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Type Name and Title)

Signature of Registered Agent (Type Name and Title)

86

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (Type Name and Title)

☐ Change ☐ Addition

1. NAME

P
SCOTT, DONALD W
949 TIMBER GREEN DRIVE
LAKELAND FL 33809

1. NAME

2. STREET ADDRESS
CITY, ST. ZIP

100001545381
-07/25/95--01064--018

*****225.00 *****225.00

2. NAME

S
SCOTT, CAROLYN
949 TIMBER GREEN DRIVE
LAKELAND FL 33809

2. NAME

3. STREET ADDRESS
CITY, ST. ZIP

☐ Change ☐ Addition

3. NAME

4. NAME

3. NAME

4. STREET ADDRESS
CITY, ST. ZIP

☐ Change ☐ Addition

4. NAME

5. NAME

4. NAME

5. STREET ADDRESS
CITY, ST. ZIP

☐ Change ☐ Addition

5. NAME

6. NAME

5. NAME

6. STREET ADDRESS
CITY, ST. ZIP

☐ Change ☐ Addition

6. NAME

7. NAME

6. NAME

7. STREET ADDRESS
CITY, ST. ZIP

☐ Change ☐ Addition

7. NAME

8. NAME

7. NAME

8. STREET ADDRESS
CITY, ST. ZIP

8. NAME

9. NAME

8. NAME

9. STREET ADDRESS
CITY, ST. ZIP

9. NAME

SIGNATURE:

Carolyn Scott / Carolyn Scott
SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-95

5/3-95-2245