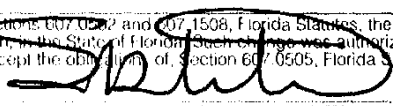
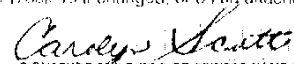


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 26 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
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 33809-4680	
2. Principal Place of Business 21 6820 S. Florida Ave Suite, Apt. #, etc. 22 City & State 23 Lakeland, FL 24 Zip 33813 25 Country Polk		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30	
3. Date Incorporated or Qualified 12/09/1994		3a. Date of Last Report 05/01/1996	
4. FEI Number 59-3310345		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 SCOTT, CAROLYN 949 TIMBERGREEN DRIVE LAKELAND FL 33809		10. Name and Address of New Registered Agent 81 Name Stephen H. Artman 82 Street Address (P.O. Box Number is Not Acceptable) 908 S. Florida Ave 83 Suite 102, Colonial Bldg 84 City Lakeland, FL FL 85 Zip Code 33803	
11. Pursuant to the provisions of Sections 607.05(2) 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  DATE 3-20-97 (NOTE: Registered Agent's signature required when reinstating)			
12. OFFICERS AND DIRECTORS 1.1 TITLE P 1.2 NAME SCOTT, DONALD W 1.3 STREET ADDRESS 949 TIMBER GREEN DRIVE 1.4 CITY-ST-ZIP LAKELAND FL 33809 2.1 TITLE S 2.2 NAME SCOTT, CAROLYN 2.3 STREET ADDRESS 949 TIMBER GREEN DRIVE 2.4 CITY-ST-ZIP LAKELAND FL 33809 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE P/D 1.2 NAME Scott, Jr., Donald W. 1.3 STREET ADDRESS 949 Timbergreen Drive 1.4 CITY-ST-ZIP Lakeland, FL 33809 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3-15-97 941-640-7808 Date Daytime Phone #	



CR2E034 (9/96)