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

PROFIT . **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000003282 (7)

C. D. W., INC.

Principal Place of Business

Mailing Address

FILED May 18 1998 8:00am Secretary of State



2489 BROAD STREET 2489 BROAD STREET **BROOKSVILLE FL 34609** BROOKSVILLE FL 34809 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 17076 Flight 17076 Flight Puth Drive 65-0550587 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Brooksuille Brooksuille Added to Fees 23 28 Trust Fund Contribution Country 8. This corporation owes or has paid the current year Intangible 25 USA 34609 USA 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DEGEEST, GORDON E 2489 BROAD STREET Street Address (P.O. Box Number is Not Acceptable) **BROOKSVILLE FL 34609** 83 84 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 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 1097 OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 Total NAME CORAZZI, DOMINIQUE P 1.2 NAME 2489 BROAD STREET 1.3 STREET ADDRESS STREET ADDRESS **BROOKSVILLE FL 34609** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition DEGEEST, GORDON E NAME 2.2 NAME 2489 BROAD STREET STREET ADDRESS 2.3 STREET ADDRESS **BROOKSVILLE FL 34609** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE WEST, JEFFREY NAME 3.2 NAME STREET ADDRESS 2489 BROAD STREET 3.3 STREET ADDRESS BROOKSVILLE FL 34609 CITY-ST-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-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP ___ DELETE Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS**

14. I 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

11-29-98