

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000006564 (5)

1. Corporation Name

WOOD YOU OF MANDARIN, INC.

Principal Place of Business

11148 SAN JOSE BLVD.
JACKSONVILLE FL 32223

Mailing Address

11148 SAN JOSE BLVD.
JACKSONVILLE FL 32223

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

BLANKENSHIP, CHARLES
2320 N. LIBERTY ST.
JACKSONVILLE FL 32206

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 607.0502 and 607.1503, 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 of the person who is authorized to execute this statement on behalf of the corporation.

Signature of the person who is authorized to execute this statement on behalf of the corporation.

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
D	BLANKENSHIP, CHARLES	2320 N. LIBERTY ST.	JACKSONVILLE FL 32206	☐
D	JOHNSTON, ALTON	2320 N. LIBERTY ST.	JACKSONVILLE FL 32206	☐
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13.

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
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				☐
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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)(a), 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: *C. Blankenship*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
C. H. BLANKENSHIP

2-12-96 904 354 0200

CR2E034 (12/95)