

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000065899

1. Corporation Name

THE WRENCH, INC.

Principal Place of Business

C/O WRB ENTERPRISES
1414 SWAN AVENUE #201
TAMPA FL 33606

Mailing Address

C/O WRB ENTERPRISES
1414 SWAN AVENUE #201
TAMPA FL 33606

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

28

Country

24

25

29

Zip

30

Country

9. Name and Address of Current Registered Agent

RICE, K B
1902 ARDSLEY PLACE
TAMPA FL 33629

81 Name

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

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	G. ROBERT BLANCHARD		1.2 NAME
STREET ADDRESS	1414 SWANN AVE #201		1.3 STREET ADDRESS
CITY-ST-ZIP	TAMPA FL 33606		1.4 CITY-ST-ZIP
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARTLEY K. RICE		2.2 NAME
STREET ADDRESS	1414 SWANN AVE #201		2.3 STREET ADDRESS
CITY-ST-ZIP	TAMPA FL 33606		2.4 CITY-ST-ZIP
TITLE	TD	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUSIE N ADAMS		3.2 NAME
STREET ADDRESS	1414 SWANN AVE #201		3.3 STREET ADDRESS
CITY-ST-ZIP	TAMPA FL 33606		3.4 CITY-ST-ZIP
TITLE	S	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SYLVIA SCHMIDTETTER		4.2 NAME
STREET ADDRESS	1414 SWANN AVE #201		4.3 STREET ADDRESS
CITY-ST-ZIP	TAMPA FL 33606		4.4 CITY-ST-ZIP
TITLE	D	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANCHARD, WILLIAM M		5.2 NAME
STREET ADDRESS	1414 SWANN AVE., #201		5.3 STREET ADDRESS
CITY-ST-ZIP	TAMPA FL 33606		5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *Susie Adams*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99

(813) 251-3737

Date

Daytime Phone #

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90025 014 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/24/1995

4. FEI Number

59-3336103

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax. Yes No

CR2E034 (11/98)