## 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 # P95000077786 (8)

WSS ASSOCIATES, INC.

FILED
May 08 1998 8:00am
Secretary of State

|--|--|

Principal Place of Business Mailing Address			1 (COLINGA) HAD COLOR DIVIN BOURT DEHIN DONIN DONIN IERAL	10011 1000 10110 0111 1001			
SUITE J. 656 N. BEAL PARKWAY SUITE J. 656 N. BEAL PARKWA		DOWAY					
		FT. WALTON BEACH FL					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 10/02/1995		
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For		
21		26	26		59-3352614	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27	27		5. Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the curre	ent year Intangible	
24	25	29	30			Yes No	
	g, Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered A	gent	
	RUGGS, WILLIAM K JR.			Name			
	ITE J <b>, 656</b> N. BEAL PARKWA'	Y	1	82 Street Address (P.O. Box Number is Not Acceptable)			
FT. WALTON BEACH FL 32547		L					
			6	63			
			Į	14 City	Pl	85 Zip Code	
44 Chiroman	to the avertiles of Continue CO7.	01.00 1.007 1500 Fig 1.004 1		<u> </u>	FL		
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 little if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
12.		AND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	D	DELETE	1.1 1/11	E		Change Addition	
NAME	SCHOR, FREDERICK D		1.2 NAM	ıε l		v -	
STREET ADDRESS	410 BARATARIA LANE		1.3 STR	ET ADDRESS			
CITY-ST-ZIP	FT. WALTON BEACH FL 3	2547		-ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITL			Change Addition	
NAME	SCRUGGS, WILLIAM K JR.		2.2 NAM	E.			
STREET ADDRESS	664 NAVY ST.			ET ADDRESS			
CITY-ST-ZIP	FT. WALTON BEACH FL 3	2547	1	(-ST-ZIP	•		
FITLE	D	DELETE	3 1 TITL			Change Addition	
NAME	WALKER, ROBERT A		3.2 NAM		·		
STREET ADDRESS	BLK 3, LOT 24, SANTA MO	ONICA SUBDIVISION		ET ADDRESS			
CITY-ST-ZIP	SUBIC ZAMBALAS, PHILIP			-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME		- -	4. 2 NAA		•		
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-\$T-ZIP			
TITLE		DELETE	5.1 TITU			Change Addition	
NAME			5.2 NAM	E			
STREET ADDRESS			ł	ET ADDRESS			
CITY-SI-ZIP			5.4 CITY	I		]	
TITLE		DELETE	61 TITLE			Change Addition	
NAME			6.2 NAM		•		
STREET ADDRESS				ET ADDRESS		l	
CITY-ST-ZIP			6.4 CITY				
			0.7 0111	U1-E11		Į.	

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.

SIGNATURE