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FILED
Mar 20 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 # **P95000082345 (6)**

1. Corporation Name
V. W. OF PENSACOLA, INC.



Principal Place of Business Mailing Address
8060 LAVELLA WAY **8060 LAVELLA WAY**
PENSACOLA FL 32526 **PENSACOLA FL 32526-8776**

2. Principal Place of Business
21 **314 E. ROMANA ST.**

2a. Mailing Address
26 **314 E. ROMANA ST.**

3. Date Incorporated or Qualified
10/26/1995

3a. Date of Last Report
12/31/1996

4. FEI Number
APPLIED FOR 59-3422006

Applied For
Not Applicable

22 City & State
23 **PENSACOLA, FL**

27 City & State
28 **PENSACOLA, FL**

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

24 Zip Country
32501

29 Zip Country
32501

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VUCOVICH, HAROLD J
8060 LAVELLA WAY
PENSACOLA FL 32526

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
314 E. ROMANA ST.

83

84 City
PENSACOLA

FL

85 Zip Code
32501

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 of President, Secretary or Treasurer of corporation and if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P VUCOVICH, HAROLD J**
STREET ADDRESS **8060 LAVELLA WAY**
CITY-STATE-ZIP **PENSACOLA FL 32526**
TITLE ☐ DELETE
NAME **V WRIGHT, LARRY**
STREET ADDRESS **8060 LAVELLA WAY**
CITY-STATE-ZIP **PENSACOLA FL 32526**
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **Harold J. Vucovich**
1.3 STREET ADDRESS **314 E. ROMANA STREET**
1.4 CITY-STATE-ZIP **PENSACOLA, FL 32501**
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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

DATE

Original, Please # 0011684

CR2E034 (9/96)