FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P95000088339 (3)**

1. Corporation Name

WTM INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
99 POQUITO ROAD SHALIMAR FL	99 POQUITO ROAD SHALIMAR FL

3. Date Incorporated or Qualified: **11/16/1995**

3a. Date of Last Report:

4. FEI Number: **59-3350559** ☐ Applied For ☐ Not Applicable

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

2. Principal Place of Business
21
Suite/Apt. #
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite/Apt. #
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

NEWMAN, RAYMOND F JR.
150 EGLIN PARKWAY NE
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

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 Section 607.1007, 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

12. OFFICERS AND DIRECTORS

P/D
William T. McAdoo
99 Poquito Road
Shalimar, FL 32579

S/T/D
Jill D. McAdoo
99 Poquito Road
Shalimar, FL 32579

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is true, accurate, and complete. I further certify that the information indicated on this report or supplemental 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 business agent authorized 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 added to the report with an address.

SIGNATURE: 1/29/96 (904) 609-0207

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM T. McAdoo

Date Daytime Phone

CR2E034 (12/95)