

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jun 20, 2005 8:00 am
Secretary of State

04-29-2005 90227 009 ***150.00

DOCUMENT # P95000093509

1. Entity Name
WANE SERVICES CORP.



Principal Place of Business
**11649 MANDARIN TERRACE ROAD
JACKSONVILLE, FL 32223**

Mailing Address
**POST OFFICE BOX 23375
JACKSONVILLE, FL 32241**

66023364



04232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3366129	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**OEHLMAN, WAYNE L
11649 MANDARIN TERRACE RD.
JACKSONVILLE, FL 32223**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent's signature required when reselecting) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD OEHLMAN, WAYNE LOUIS 11649 MANDARIN TERRACE ROAD JACKSONVILLE, FL 32223
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD OEHLMAN, EMILY R 11649 MANDARIN TERRACE ROAD JACKSONVILLE, FL 32223
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

12. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne L. Oehlman / Wayne L. Oehlman 6/15/05 904-292-0095
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

WANE Services Corp.
11649 Mandarin Terrace Rd.
Jacksonville, FL 32223

66023364
#P95000093509

June 15, 2005

Florida Dept of State
409 E. Gaines Street
Tallahassee, FL 32399

Attn: Corporate Reports Section

Gentlemen:

Per your letter of May 15, 2005, returning my annual report as unsigned, attached is the signed copy of the corporate report for WANE Services Corp. I request waiver of the late fee, due to the fact that we have been out of the country for the past month, on family business in the Phillipines, and was unable to retrieve the mail until yesterday. I called your office immediately this morning and spoke to a lady named Yula to ask for instructions. Also, please change our mailing address to 11649 Mandarin Terrace Rd., Jacksonville, FL 32223, as I am not going to use the post office box any longer. Thank you for your consideration of this request.

Sincerely,

Wayne L. Oehlman

Wayne L. Oehlman, President