## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

ANNUAL REPORT 1996 DIVISION OF CORPORATIONS P95000097397 (0) **DOCUMENT #** WEDGEFIELD CENTRE, INC. Principal Place of Business Mailing Address 664 SOUTH MILITARY TRAIL 664 SOUTH MILITARY TRAIL DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 3. Date Incorporated or Qualified 3a. Date of Last Report 12/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FET Number Applied For 21 65-0640172 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 30 Country Zφ Country 8. This corporation has liability for intangible tax under s. 199,032. 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Blake HART: BRIAN A-82 -SUNTRUST INTERNATIONAL CENTER-6645. Military ONE S.W. THIRD AVE. 17TH FLOOR 83 - MIAMI FL 99191 85 33442 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505 Florida Statutes. Blak SIGNATURE 3/18/96 ne of registered agent and tire if applicable 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 11116 Change Addition FORRER, JOHN O NAME 1.2 NAME 664 SOUTH MILITARY TR. STREET ADDRESS 1.3 STREET ADDRESS **DEERFIELD BEACH FL 33442** CITY-ST-ZIP 1.4 CHY - \$1 - ZIP TITLE DELETE 2.11016 Change Addition BLAKE, GERALD F 2.2 NAME 664 SOUTH MILITARY TR. STREET ADDRESS 2.3 STREET ADDRESS DEERFIELD BEACH FL 33442 CITY - ST - ZIP 2.4 CITY - ST- ZIP DELETE 3 1 HILLE ☐ Change Addition: NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7IP 3.4 CHTY - ST - ZIP TIPLE DELETE Addition 4. 1 TITLE ☐ Change NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - \$1 - ZIF DELETE TITLE 5 1 THEF Change Add-tion NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP TITLE DELETE 6-1 TPLE 5000017655**45**® Addition NAME 6.2 NAME -04/02/96--01007--020

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). 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

6.3 STREET ADDRESS

6.4 CITY - S1 - ZIP

SIGNATURE:

STREET ADDRESS

3/18/96<sub>Date</sub>

\*\*\*200.00

954-410-1011

CR2E034 (12/95)