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

P95000097397 (0) DOCUMENT #

WEDGEFIELD CENTRE, INC.		•
	Principal Place of Business	Mailing Address
	664 SOUTH MILITARY TRAIL Deerfield beach FL 33442	664 South Military Trail Deerfield Beach Fl 33442

FILED Apr 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>12/27/1995</u> 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable <u>65-0640172</u> Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 5. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 ZiD Country Zip Country 8. This corporation owes or has paid the current year Intangible XIXXYes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BLAKE, GERALD F 664 SOUTH MILITARY TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33442** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 (NOTE Registered Agent signature required when reinstating) Signature, typed or portled name of rugistered agent and little if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition XXXDELETE 1.1 TITLE ☐ Change TITLE NAME FORRER, JOHN O 1.2 NAME 664 SOUTH MILITARY TR. STREET ADDRESS 1.3 STREET ADDRESS **DEERFIELD BEACH FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change XXXAddition TITLE 2.1 TITLE D **BL**AKE, GERALD F NAME 2.2 NAME STREET ADDRESS **664 SOUTH MILITARY TR.** 2.3 STREET ADDRESS **DEERFIELD BEACH FL** CITY-ST-ZIP 2. 4 CITY - ST-ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE BRACKEN, CYNTHIA M 3.2 NAME 664 S MILITARY TRAIL STREET ADDRESS 3.3 STREFT ADDRESS DEERFIELD BCH FL CITY-ST-ZIP 3.4. CITY - ST - ZIP ☐ DELETE Change ■ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP

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

C. M. Bracken

4/23/98

954/419-1013