

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000097778 (1)

1. Corporation Name

WINGSPAN PRODUCTIONS, INC.



Principal Place of Business

7110 WRENWOOD WAY
WINTER PARK FL 32792

Mailing Address

7110 WRENWOOD WAY
WINTER PARK FL 32792

2. Principal Place of Business

2a. Mailing Address

21 4607 CASON COVE DR

26

22 Suite, Apt. #, etc.

27 State, Apt. #, etc.

23 413

27

City & State

City & State

24 32811

25 Orange

29

Zip

Country

24 32811

25 Orange

29

Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/22/1995

3a. Date of Last Report

NONE

4. FET Number

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

10. Name and Address of New Registered Agent

ZANCA, FRANK J
7110 WRENWOOD WAY
WINTER PARK FL 32792

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 607.0503, Florida Statutes.

SIGNATURE

Signature of person making change of registered office or agent

Signature of person making change of registered office or agent

Date

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME ZANCA, FRANK J
STREET ADDRESS 7110 WRENWOOD WAY
CITY-STATE-ZIP WINTER PARK FL 32792

2. TITLE ☐ DELETE

NAME BERRY, JOHN T
STREET ADDRESS 2481 EUSTON ROAD
CITY-STATE-ZIP WINTER PARK FL 32789

3. TITLE ☐ DELETE

NAME CORTLAND, SHERRI A
STREET ADDRESS 2648 BAY LEAF DRIVE
CITY-STATE-ZIP ORLANDO FL 32837

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

2. TITLE ☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

3. TITLE ☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

4. TITLE ☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

5. TITLE ☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

6. TITLE ☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-96 (407) 423-2078

CR2E034 (12/95)