## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600002234

1	
Principal Place of Business	Mailing Address
107 FRIAR CT	107 FRIAR CT SERASTIAN FL 32958

## FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90085 017 \*\*\*150.00

RICHARI	D WETHERALD, INC.							
Principal Place	e of Business	Mailing Address					<b>BE</b> (18 11619 111	(44 11111 B)B; 1881
107 FRIAR CT	•	107 FRIAR CT						
SEBASTIAN FL 32958 SEBASTIAN FL 32958					DO NOT WRITE IN TUI	COACE		
						DO NOT WRITE IN THIS  3. Date Incorporated or Qualifed	SPACE	<del></del> -1
	I D discount	D. Mailian Address	<del></del>	-		01/04/1996 4. FEI Number	1 7	Applied For
<del></del>	lace of Business	2a. Mailing Address						Not Applicable
21	# -6-	Suite, Apt. #, etc.				59-3349469		Additional
Suite, Apt.	#, etc.	27				5. Certificate of Status Desired	Fee f	Required
22 City & Stat	8	City & State				6. Election Campaign Financing	\$5.00	May Be
23	•	28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year In	tangible	~/
24	25	29	30	-		Personal Property Tax.	∐Yes	/IX(No
-41	9. Name and Address of Curren		11			10. Name and Address of New Registered	Agent	V
				81	Name			
WEH	ITERALD, RICHARD			82	Stront A	ddress (P.O. Box Number is Not Acceptable)		
107	FRIAR CT			02	Street At	duless (F.O. Box Number is Not Acceptable)		
SEB	astian FL 32958			83				
							85 Zir	Code
				84	City	FL	_  85  24	Code
office or re agent. I as	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	autnonzeo Iorida Stati	utes.	tne corpora	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose of ation's board of directors. I hereby accept the appointment of the purpose of the pur	intment as i	registered
	Signature, typed or printed name of registered ager			Agen	t signature req	uired when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
12.		D DIRECTORS DELETE	13. 1.1 Π	TI C		ADDITIONS/CITANGED TO CITIGETIC A	Change	
TITLE	P DICUADO	£ Deceit	1.2 N				_ `	_ {
NAME	WETHERALD, RICHARD				***************************************			1
STREET ADDRESS	107 FRIAR CT				ADDRESS			
CITY-ST-ZIP	SEBASTIAN FL 32958	☐ DELETE	1.4 CI 2.1 TI	TY-\$1	I-ZIP ,		☐ Change	Addition
TITLE	V	☐ DELETE						
NAME	WETHERALD, LOREN		2.2 N		100000			
STREET ADDRESS	107 FRIAR CT	_			ADDRESS	٠.		
CITY-ST-ZIP	SEBASTIAN FL 32958	☐ DELETE	2. 4 C	ITY-S	T-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
TITLE			3.1 ti					
NAME					ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP TITLE		DELETE	3.4. C		1-211		Change	e
			4.2 N				_ ,	_
NAME					ADDRESS			
STREET ADDRESS			4.4 Ci					:
CITY-ST-ZIP		☐ DELETE	5.1 TI		-245		☐ Change	Addition
NAME			5.2 N/				_	ł
STREET ADDRESS			i i		ADDRESS			ļ
			5.4 CI					ļ
TITLE		DELETÉ	6.1 Ti		+		☐ Change	e ☐ Addition
			6.2 N				_ ,	{
NAME	. • • •				ADDRESS			ì
STREET ADDRESS			0.00		70			

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 furstee 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, with all other like empowered.

SIGNATURE: