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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000013343 (4)

H & W HOLDING, INC.

Principal Place of Business 915 CRESTWOOD STREET ALTAMONTE SPRINGS FL 32701 Mailing Address

915 ALT

915 CRESTWOOD STREET ALTAMONTE SPRINGS FL 32701-8437

FILED May 12 1997 8:00am Secretary of State



21 9 Strite, 22 City &	par Piace of Business Support H, etc State State	26. Mailing Address 26. Suite, Apt. #, etc.	STUTPEN -	02/08/1996 07 4. FEI Number 07 56 27 58 12 10	Applied For
Strite, 22 City &	State State State		STUTTOND -	(1) スピックソクタノジノュー	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City &	Apt. #, eté State	Súite, Apt. #, etc.		11 070,000	Not Applicable
,	State	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Ζiρ 24] ζ ο	City & Strite ALTAMENTE SPATINGS 28 ALTAMENTE		spys.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
م ^ا ک	Country	Zip	Country	8. This corporation has liability for intangli	
	1101 25 SemINOLE		30 Semino		No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registere	A Agent
	OWEN, RICHARD B 5250 SO. HIGHWAY 17-92 LONGWOOD FL 32707		82 Street 83 84 City	Address (P.O. Box Number is Not Acceptable) Address (P.O. Box Number is Not Acceptable)	7 L 85 Zip Code 32707
office agen	e or registered agent, or both, in the State o it. I am familiar with, and accept the obligati	fillorida Such change was a	authorized by the corp	corporation submits this statement for the purpose poration's board of directors. I hereby accept the a	
SIGNATU	Sign-core, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	☐ DELETE	1.1 TITLE	PRESIDENT - TRESICK	Change Addition
NAME	WARD, KEVIN P		1.2 NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STHEET ADDR	RESS 915 CRESTWOOD STREET		1.3 STREET ADDRESS		
CHY-ST ZIP	ALTAMONTE SPRINGS FL 3270	11	1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE	U- PRESIDENT-SCENERY	Change Addition
NAME	WARD, BILLIE J		2.2 NAME	/	
STREET ADDE	915 CRESTWOOD STREET		2.3 STREET ADDRESS		
CITY - ST - ZIP		1	2.4 CITY-ST-ZIP		
111.f	D	. DELETE	3 1 TITLE	V-PRCSIDENT	Change Addition
NAML	HOELSCHER, CAROLE		3.2 NAME	V . 41C320017.	
STREET ADDR	20 1 EL111 AALIBE		33 STREET ADDRESS		
City-St-Zir	CONTRACTOR OF THE AGAIN		3 4. CITY-ST-ZIP		
THE	D	DELETE	4.1 THILE	LE ROSTANDUT	Change Addition
NAME	HOELSCHER, JOHN	— •	4. 2 NAME	V-PRESIDENT	· - · - · · · · · · · · · · · · · ·
STREET ADDR	THE LOUISING CALLED		4.3 STREET ADDRESS		
	WHI A LANGUAL OF A DIV A 4004		4.4 CITY - ST - ZIP		
CITY-ST-ZIP TITLE	TILLUMOTILLE ITI 1766	DELETE	5.1 TITLE		Change Addition
NAME			5.7 NAME		ALMONO FILE AGRICUIT
					•
STREET ADTI-			6.3 STREET ADDRESS		
COY-SI-ZIP	·	Floreste	5.4 CITY - ST - ZIP		Change I Administra
TIFLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDIT	HI 55		6.3 STREET ADDRESS		
City-St-7iP			6.4 CITY-ST-ZIP	tated in Section 119.07(3Xi), Florida Statutes. I fun	

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

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

) 21-29-97 695 Dare Daytimo Phr

aytime Phone #