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 # P96000017041

WAYMONT DEVELOPMENT CORPORATION

FILED Mar 02, 1999 8:00 am Secretary of State 03-02-1999 90190 008 ***150.00



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Principal Place of Business Mailing Address						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	19 81111 30117 44117 00111 41			
1455 W LAKE MARY BLVD .AKE MARY FL 32795		P.O. BOX 950337 LAKE MARY FL 32795-0337					O NOT WRITE IN TI	HIS SPACE		
						3. Date Incorporated			 -	i
						03/01/1996	0, 444		l	
O Drive single Of	and of Pulainosa	2a. Mailing Address				4. FEI Number		- I An	plied For	
2. Principal Place of Business 2a. Mail			aming Address			1		<u> </u>	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						\$8.75		Į
27		27				5. Certifcate of Statu	s Desired	•	equired -	l
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			May Be		
3		28			Trust Fund Contri	,	Added to Fees			
Zip	Country	Zip		Countr	у	8. This corporation of	wes the current year	Intangible		
4	25	29	30]		Personal Property		Yes	□No	
	9. Name and Address of Current	t Registered Agen	nt			10. Name and Addre	ss of New Register	ed Agent		
				8	Nable	HERINE L	SAREI	NSEN	1	l
	ENSEN, KATHERINE L					Street Address (P.O. Box Number is Not Acceptable)				
	EXECUTIVE DR OLL		New _		15	25 TRI	ANGLE	DR.		
WiN	TER PARK FL 32789			→ [8:	3		/			
				84	City			85 -Zip	Code	
					mr	DORA		·∟↓⊅⋞	75 7	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Flo	orida Statutes,	the abo	ve-named corp	oration submits this state	ment for the purpose	of changing its	registered	
office or r agent. 1 a	to the provisions of Sections 607.050 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such cha tions ≢f, Section 60	ange was aum 7.0505, Florida	Statute	y me corporations.	on a goard of directors, i	hereby accept the ap		9.010104	
SIGNATUR	The trace of	X Low	0 110 1	~ ·	/		1/17	199		
SIGNATIONS.	Organization prince in prince in a second control of the second co	t and if e if applicable.	(NOTE: Re		ent signature require		DATE	***************************************	200 101 40	6
12.	OFFICERS AN			13.		ADDITIONS/CHAN	GES TO OFFICERS	AND DIRECTO	Addition	7
TITLE	D	☐ DELETÊ		1.1 TITLE				[] Criange	☐ ∧ooiiion	1
NAME	CANAL, JOHN W			1.2 NAME						ع ا
STREET ADDRESS	3455 W LAKE MARY BLVD			1.3 STREET ADDRESS						Ü
CITY-ST-ZIP	LAKE MARY FL 32795			1.4 CITY-				Change	Addition	ļ
TITLE	D	-		2.1 TITLE				☐ Change	Add(60)1	`
NAME	SHARP, BOBBY M			2 2 NAME						
STREET ADDRESS	3455 W LAKE MARY BLVD	∦ ;		2.3 STREET ADDRESS		•	•		,	
CITY-ST-ZIP	LAKE MARY FL 32795			2. 4 CITY-\$T-ZIP				Change	Addition	ł
TITLE	D			3.1 TITLE	i			Cliange	☐ Addition	Ì
NAME	CANAL, ELIZABETH B			3.2 NAME						
STREET ADDRESS	3455 W LAKE MARY BLVD	j		3.3 STREET ADDRESS						
CITY-ST-ZIP	LAKE MARY FL 32795			3.4. CITY-ST-ZIP				☐ Change	[] Addition	ł
TITLE	D	_		4.1 TITLE				□] Criainge		
NAME	MACHULES, DAWN			4. 2 NAM	=					
STREET ADDRESS		<u> </u>		4.3 STREET ADDRESS		•				
CITY-ST-ZIP	LAKE MARY FL 32795				ST-ZIP			C] Changa	☐ Addition	ł
TITLE		L	DELETE 5.1 TIT				*	Change		
NAME				5.2 NAME	1	•				
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP			DELETE	5.4 CITY-				[]Chanca	☐ Addition	-
TITLE			DELETE :	6.1 TITLE				Change	∐ ∧вашоп	ĺ
NAME				6.2 NAME	1					
STREET ADDRESS					ET ADDRESS					1
CITY OF THE				6.4 CITY-	ST-ZIP I					1

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 of 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, with all other like empowered.