

4-15-97 B-4681 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000081397 (7)

1. Corporation Name

WAGNER & SCHILLING INC.

Principal Place of Business

19635-49 SOUTH STATE ROAD 7
BOCA RATON FL 33498

Mailing Address

19635-49 SOUTH STATE ROAD 7
BOCA RATON FL 33498-4771

2. Principal Place of Business

21 20423 STATE ROAD 7

Suite, Apt. #, etc.

22 SUITE 149

City & State

23 BOCA RATON FL

Zip

24 33498

Country

25 PALM BCH

2a. Mailing Address

26 20423 STATE ROAD 7

Suite, Apt. #, etc.

27 SUITE 149

City & State

28 BOCA RATON FL

Zip

29 33498

Country

30 PALM BCH

3. Date Incorporated or Qualified

10/02/1996

3a. Date of Last Report

NONE

4. FEI Number

65-0700244

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KLEIN, JEFFREY G
2600 N. MILITARY TRAIL
SUITE 270
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name BROCKETT C. WAGNER
82 Street Address (P.O. Box Number is Not Acceptable)
18288 CORAL ISLES DRIVE
83
84 City BOCA RATON FL 85 Zip Code 33498

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 607.0505, Florida Statutes.

SIGNATURE BROCKETT C. WAGNER

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when registering)

DATE

4-8-97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME WAGNER, BROCKETT C
STREET ADDRESS 2600 N. MILITARY TRAIL, SUITE 270
CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ DELETE

NAME SCHILLING, HENRY W III
STREET ADDRESS 2600 N. MILITARY TRAIL, SUITE 270
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME WAGNER, BROCKETT C.
1.3 STREET ADDRESS 20423 STATE ROAD 7, BOX 149
1.4 CITY-ST-ZIP BOCA RATON FL 33498

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME SCHILLING, HENRY W III
2.3 STREET ADDRESS 20423 STATE ROAD 7, BOX 149
2.4 CITY-ST-ZIP BOCA RATON FL 33498

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

BROCKETT C. WAGNER

CR2E034 (9/96)