

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

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**Feb 10 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

**DOCUMENT # P96000086546 (4)**

1. Corporation Name  
**WORLD WIDE VAN LINES, INC.**



Principal Place of Business: **131 TAYLOR STREET PUNTA GORDA FL 33950**  
Mailing Address: **131 TAYLOR STREET PUNTA GORDA FL 33950-3654**

3. Date Incorporated or Qualified: **10/21/1996**  
3a. Date of Last Report

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
21 <b>8531 Driftwood Street</b>	26 <b>8531 Driftwood Street</b>	5. Certificate of Status Desired	<input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
22 Suite, Apt #, etc.	27 Suite, Apt #, etc.	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
23 <b>Hobe Sound, Florida</b>	28 <b>Hobe Sound, Florida</b>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24 Zip <b>33455</b>	25 Country <b>US</b>	29 Zip <b>33455</b>	30 Country <b>US</b>

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
<b>JOHNSON, E. DAVID 131 TAYLOR STREET PUNTA GORDA FL 33950</b>	81 Name <b>Todd W. McGathey</b>
	82 Street Address (P.O. Box Number is Not Acceptable) <b>8531 Driftwood Street</b>
	83
	84 City <b>Hobe Sound</b> FL 85 Zip Code <b>33455</b>

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: *Todd W. McGathey* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MCGATHEY, TODD WILLIAM</b>	1.2 NAME	<b>McGathey, Todd W.</b>
STREET ADDRESS	<b>4737 RIVERSIDE DR.</b>	1.3 STREET ADDRESS	<b>8531 Driftwood Street</b>
CITY-ST-ZIP	<b>PUNTA GORDA FL 33982</b>	1.4 CITY-ST-ZIP	<b>Hobe Sound, Florida 33455</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	<b>500002083339</b>
STREET ADDRESS		6.3 STREET ADDRESS	<b>-02/11/97--01042--011</b>
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<b>***165.00</b>

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: *Todd W. McGathey* (SIGNED)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE: Daytime Phone #

CR2E034 (9/96)