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FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000090177. (2)

1. Corporation Name

WINCHENBACH LAW FIRM, P.A.



Principal Place of Business

Mailing Address

7651 SW SR 200
STE 207
OCALA FL 34476
US

7651 SW SR 200
STE 207
OCALA FL 34476
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	3710 SE 12 Place	26	3710 SE 12 Place
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23	Ocala, FL	28	Ocala, FL
Zip		Zip	
24	34471	29	34471
Country		Country	
25		30	

3. Date Incorporated or Qualified

11/01/1996

4. FEI Number

59-3422560

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WINCHENBACH, LINDA L
7651 SW STATE RD
STE 207
OCALA FL 34476

81 Name

Same registered agent

82 Street Address (P.O. Box Number is Not Acceptable)

3710 SE 12 Place

83

84 City

Ocala

FL

85 Zip Code

34471

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	WINCHENBACH, LINDA L	1.2 NAME	Linda L. Winchenbach
STREET ADDRESS	7651 SW STATE RD 200 SUITE 207	1.3 STREET ADDRESS	3710 SE 12 Place
CITY-ST-ZIP	OCALA FL 34476	1.4 CITY-ST-ZIP	Ocala, FL 34471
TITLE	PS	2.1 TITLE	PS
NAME	WINCHENBACH, LINDA L.	2.2 NAME	Linda L. Winchenbach
STREET ADDRESS	7651 SW SR 200, STE 207	2.3 STREET ADDRESS	3710 SE 12 Place
CITY-ST-ZIP	OCALA FL	2.4 CITY-ST-ZIP	Ocala, FL 34471
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: [Signature] 4/17/98 (352) 373-6291

CR2E034 (10/97)