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

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 08 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000096237 (8)

WILL PAGE XII, INC.

Principal Place of Business Mailing Address									
832 W. BRANDO BRANDON FL 3	ON BLVD. 3511		932 W. BRANDON BLVD. BRANDON FL 33511-4906						
						3. Date incorporated or Qualified 11/20/1996	3a. Dat	e of Last F	Report
<u> </u>	Place of Business	2a. Mailing Addre	ss			4. FEI Number		Δι	oplied for
21 Suite Ant	4 oto	26				65-07/1432			of Applicable
Sulte, Apt.	. #, etc.	Suite, Apt. #,	eic.			5. Certificate of Status Desired		•	Additional
22 City & Stat	le	Cily & State	Cily & State			Fee Required			
23	•	<sub>1</sub>	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country		Zip				B. This corporation has liability for intangible tax under s. 199.032.			
24	25 29 30		30			Florida Statutos Yes No			
	g, Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered A	gent	
	NS, WILLIAM		ļ	81	Name				
	W. BRANDON BLVD.		ļ	82	Strout Addre	dress (P.O. Box Number is Not Acceptable)			
BRAI	NDON FL 33511			83					
				03					
				84	City		FL	<b>85</b> Zip	Code
i office of i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such chanc	ie was authorized	1 IV	' the cornoratir	oration submits this statement for the pon's board of directors. I hereby accep	urpose of o	changing it intment as	ls registered registered
SIGNATURE	Signature, typed or printed name of registered ag		***						
12.	·····	ID DIRECTORS	13.	i Age	nt signature require	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIBLOTOS	20 IN 19
TITLE	D	DEI		i E	- ··· · · · · · · · · · · · · · · · · ·	ADDITIONO/OFFICE TO OFFICE		Change	Addition
NAME	CARRIGAN, THOMAS G JR		1.2 NA	ME			-		•
STREET ADDRESS	352E YALE CIRCLE		1.3 \$1	REE1.	ADDRESS				
CITY-ST-ZIP	RIVERVIEW FL 33569		1 4 CH	IY-S	I - ZIP				
TITLE	D	□ DEI	ETE 21 TH	LF				Change	Addition
NAME	MANNS, WILLIAM	••••	22 NA	ME	İ				
STREET ADDRESS	2055 SUNSET POINT ROAD #	3902	2 3 ST	REEL	ADDRESS	ı			
CITY-ST-ZIP	CLEARWATER FL 34623		2 4 0		T-ZIP			<u> </u>	
TITLE		DEC					Į	Change	Addition
NAME CTOTES ADDOCCO			3.2 NA						
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP TITLE		DEL	3.4. CI ETE 4.1 TIT		1 · Z0'			Change	Addition
NAME			4.1 III				L	onange	L_1 VOORION
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.4 CIT			•			
TITLE		☐ DEL						Change	Addition
NAME			5.2 NA	Mŧ				Ť	
STREET ADDRESS			5.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-\$1	r - ZIP				
TITLE	The same of the sa	☐ DEL	ETE 6.1 TIT	LF.				Change	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			63811	HEELA	ADURESS				
CITY-SI-ZIP	by certify that the information number	Guatata as as	6400	Y-81	1 - ZIP				

I on nereby 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 attain month with an address.