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 # P96000097676

Corporation Name

WITZCO TRAILERS, INC.

Mailing Address Principal Place of Business 6101 S. MCINTOSH ROAD 6101 S. MCINTOSH ROAD SARASOTA FL 34238 SARASOTA FL 34238 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 11/27/1996 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business Not Applicable 65-0713745 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation owes the current year Intangible Zip Country Zip **⊡**Nó Personal Property Tax. 30 29 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 JACOBSON, NORMAN E 82 2033 MAIN STREET SUITE 504 83 SARASOTA FL 34237 Zip Code 34236 84 City THE PROPERTY OF THE PARTY OF TH के भक्षा अस्ति। संस्थान 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 oligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change DELETE 1.1 TITLE TITLE WITZER, STEPHEN A 12 NAME NAME 13 STREET ADDRESS 875 SIESTA KEY CIRCLE STREET ADDRESS SARASOTA FL 34242 14 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 2.1 TITLE TITLE WITZER, MICHELLE D 2.2 NAME NAME 875 SIESTA KEY CIRCLE 2.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34242 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME

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 change it, or on an attachment with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CiTY+ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

☐ DELETE

3-12-99 (941) 922-53.01

Change

Change

Addition

Addition

FILED Mar 16, 1999 8:00 am

Secretary of State

03-16-1999 90010 010 ***150.00

CR2E034 (11/98)