

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

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90079 010 ***150.00

04-08-1999 90036 032 ***150.00

DOCUMENT # P97000090179

1. Corporation Name

WOERNER ALABAMA MARKETING, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/97

2. Principal Place of Business

21 805-A N. McKenzie St.

2a. Mailing Address

26 805-A N. McKenzie St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0794646

Applied For

Not Applicable

22 City & State

23 Foley, AL

27 City & State

28 Foley, AL

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

24 Zip

Country

25 Baldwin

29 Zip

Country

30 Baldwin

Country

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Stephen E. Scapecchi

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

83 83 Peel Way

84 City

Pensacola

FL

85 Zip Code
32533

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/11/99

DATE

12. OFFICERS AND DIRECTORS

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

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 D/S ☐ Change ☒ Addition

1.2 NAME George A. Woerner

1.3 STREET ADDRESS 15109 County Road 87

1.4 CITY-ST-ZIP Elberta, AL 36530

2.1 TITLE T ☐ Change ☒ Addition

2.2 NAME Roger L. Woerner

2.3 STREET ADDRESS 26400 Woerner Road

2.4 CITY-ST-ZIP Elberta, AL 36535

3.1 TITLE P ☐ Change ☒ Addition

3.2 NAME Lester J. Woerner

3.3 STREET ADDRESS 505 S. Flagler DR., Ste. 600

3.4 CITY-ST-ZIP West Palm Beach, FL 33401

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 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, with all other like empowered.

SIGNATURE: George A. Woerner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/99

Date

334/943-3770

Daytime Phone #

CR2E034 (11/98)