

1 of 2

1. Entity Name
WOLVERINE FRAMING, INC.



FILED

04 OCT 15 PM12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8236 BUNKER HILL RD.
DUETTE, FL 33834

Mailing Address
8236 BUNKER HILL RD.
DUETTE, FL 33834



DO NOT WRITE IN THIS SPACE

REINSTATEMENT

4. FEI Number
65-0838144

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KATZENBERGER, ROBERT H
8236 BUNKER HILL RD
BOWLING GREEN, FL 33834

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.	OFFICERS AND DIRECTORS
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TITLE	PD
NAME	KATZENBERGER, ROBERT H
STREET ADDRESS	8236 BUNKER HILL RD.
CITY - ST - ZIP	DUETTE, FL 33834

TITLE	TSD
NAME	KATZENBERGER, ROBERT (ROB) H II.
STREET ADDRESS	7619 MANETTE AVE W
CITY-ST-ZIP	BRADENTON, FL 34209

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

400041980044
10/19/04--01030--003 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/15/04 941-704-3337

Date _____

Daytime Phone: _____

20f2

www.sunbiz.org

Division of Corporations

Receipt

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

Document Number: **P98000049587**

Tracking Number: **000035206810**

The charge for your Annual Report is
\$150.00

If you want to review your document, use the browser back button to return to page 1 of the data entry. Use the browser forward button to come back to this page.

If you need to make a change, you must return to the Document Number page and start over. A new tracking number will be assigned.

If you have any questions, please contact our help desk at (850) 245-6939.

To proceed to pay for the Annual Report, press the CONTINUE button below.

By pressing the CONTINUE button, your Annual Report will be placed in processing and no additional Annual Reports may be filed for this corporation until this one is processed.

8-10-04

Continue

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Public Access Help

I have called on this at least 6 times and no body has returned my call. I filled this back in april of 04 for some reason you didn't take the money after checking with Visa account. \$150.00 I do not feel that I should have to pay the 400 late fee since I did fill this before may 1.

Thank you
Robert Kozubko Pres.