

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90105 003 ***150.00

DOCUMENT # P98000059672

1. Entity Name
SPENCER WOLF CORP.



Principal Place of Business

spencer wolf corp.
1189 Candler Road
Clearwater, FL 33765

spencer wolf corp.
1189 Candler Road
Clearwater, FL 33765

50011374



1189 CANDLER ROAD

1189 CANDLER ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092006

Chg-P

CR2E034 (11/05)

City & State

CLEARWATER, FL

City & State

CLEARWATER, FL

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

33765

Country

Zip

33765

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRUG, STEWART L
1545 S BELCHER RD
CLEARWATER, FL 33764

Name

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

City

FL

Zip Code

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 registrant, agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME WOLF, SPENCER
STREET ADDRESS
CITY - ST - ZIP

spencer wolf corp.

TITLE ☐ Delete
NAME 1189 Candler Road
STREET ADDRESS Clearwater, FL 33765
CITY - ST - ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1189 CANDLER ROAD
CITY - ST - ZIP CLEARWATER, FL 33765

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date

Daytime Phone #

S.C. Wolf

28 April 2006

727 215 0945