

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

94 AUG 17 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1994
FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS



1. Corporation Name: WAVETOW, INC.
DOCUMENT # S26697 (0)

Mailing Address: 2001 S RIDGEWOOD AVE SOUTH DAYTONA FL 32119
Principal Place of Business: 2001 S RIDGEWOOD AVE SOUTH DAYTONA FL 32119

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

| | | | |
|-------------------------|---------------------------------|--|--|
| 2. Mailing Address | 2a. Principal Place of Business | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 | 26 | 01/23/1991 | 05/01/1993 |
| 22. Suite, Apt. #, etc. | 27. Suite, Apt. #, etc. | 4. FEI Number | Applied For |
| 22 | 27 | 59-3053939 | Not Applicable |
| 23. City & State | 28. City & State | 5. Certificate of Status Desired | 6. Election Campaign Financing Trust Fund Contribution |
| 23 | 28 | \$8.75 Additional Fee Required <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Zip | 29. Zip | 7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 24 | 29 | 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | |
|--|--|
| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
| WOERNER, H. CHARLES JR. 2001 SOUTH RIDGEWOOD AVENUE SOUTH DAYTONA FL 32119 | 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 607.0504 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOT Registered Agent Signature) (Registered Agent Signature)

| 12. OFFICERS AND DIRECTORS | | 13. CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--------------------------|---|--|
| 11 TITLE | P/S/D | 11 TITLE | |
| 12 NAME | WOERNER, H. CHARLES JR | 12 NAME | |
| 13 STREET ADDRESS | 2001 SOUTH RIDGEWOOD AVE | 13 STREET ADDRESS | |
| 14 CITY - ST - ZIP | SOUTH DAYTONA BCH FL | 14 CITY - ST - ZIP | |
| 21 TITLE | | 21 TITLE | |
| 22 NAME | | 22 NAME | |
| 23 STREET ADDRESS | | 23 STREET ADDRESS | |
| 24 CITY - ST - ZIP | | 24 CITY - ST - ZIP | |
| 31 TITLE | | 31 TITLE | |
| 32 NAME | | 32 NAME | |
| 33 STREET ADDRESS | | 33 STREET ADDRESS | |
| 34 CITY - ST - ZIP | | 34 CITY - ST - ZIP | |
| 41 TITLE | | 41 TITLE | |
| 42 NAME | | 42 NAME | |
| 43 STREET ADDRESS | | 43 STREET ADDRESS | |
| 44 CITY - ST - ZIP | | 44 CITY - ST - ZIP | |
| 51 TITLE | | 51 TITLE | |
| 52 NAME | | 52 NAME | |
| 53 STREET ADDRESS | | 53 STREET ADDRESS | |
| 54 CITY - ST - ZIP | | 54 CITY - ST - ZIP | |
| 61 TITLE | | 61 TITLE | |
| 62 NAME | | 62 NAME | |
| 63 STREET ADDRESS | | 63 STREET ADDRESS | |
| 64 CITY - ST - ZIP | | 64 CITY - ST - ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Sections 110.07(3)(b) in the event that the information supplied is deemed exempt from public access. 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. I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *H Charles Jr*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
H CHARLES WOERNER JR
7/30/94 904 767 9811
Date Signature