## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(7)

	WAYNE'	S PAVIN	G INC.								
Principal Place of Business Mailing Address									SI GLOSY BYCKI BYON CURIN D	IAIT EIRIN IABI	
	948 RUSTIC DESSA FL 33	WOOD TRAI 3556	L		18948 RUSTIC WOOD TRAIL ODESSA FL 33558-5232						
								3. Date Incorporated or Qualified 06/03/1991	3a. Date of Las 01/29/199		
2.	Principal Place of Business			2a. Mailing Addr	2a. Mailing Address			4. FEI Number		Applied For	
21				26	···   · · · · · · · · · · · · · · · · ·			59-3071466		Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt #	Suite, Apt #, etc.			5. Certificate of Status Desired		5 Additional Required	
23	City & State			City & State	City & State			Election Campaign Financing     Trust Fund Contribution		May Be	
24	Zip	p Country 25		Zip 29	Zip Country		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes X No			
44	9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent			
The second secon							Name				
1002 DREW STREET CLEARWATER FL 34615						82	Street Arti	t Address (P.O. Box Number is Not Acceptable)			
							Street Add	uress (r.O, Box Number is not Accepta	loie)		
						63					
						84	City		FL 85 Z	ip Code	
	Pursuant to office or reagent. Land	to the provis egistered ag m familiar wi	ions of Sections 607.05 ent, or both, in the Stat thi and accept the obli	02 and 607,1508, Flori e of Florida Such char gations of Section 607	da Statutes, nge was aut .0505, Floric	the above horized by da Statutes	e-named co the corpor 3.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing purpose of changing purpose of the appointment	g its registered as registered	
<u></u>	Signature, typed or printed nonic of registered agent and title if app								DATE	ODO IN 10	
12 TiT		OFFICERS AND DIRECTORS  DELETE			13.	<del></del>	ADDITIONS/CHANGES TO OFFI	Chang			
NA!			WAYNE C.		1.2 N				C orang		
	REFT ADDRESS 18948 RUSTIC WOOD TRAIL						ADDRESS			į	
	Y-ST-7IP	ODESSA				1.4 CITY - S	1			-	
TITI		STD		Di	ELETE	2.1 TITLE			☐ Chang	e 🔲 Addition	
NAf	ME	FRANKE				2.2 NAME					
STE	REET ADDRESS		ustic wood trail			2.3 STREET	ADDRESS				
CIT	Y-ST-71P	ODESSA	FL			2 4 CITY-	ST-ZIP				
TIT	LE ]		<del></del> -	D	ELETE	3 1 TITLE			Chang	e Addition	
NAI	ME					32 NAME	1			]	
STE	REET ADDRESS					33 STREET	ADDRESS			j	
	Y - ST - ZIP				F. Ftr	3 4. CITY - 3	ST-ZIP		T 06	- TAGGE	
TIT	ì	l		□ D	titit	4 1 TITLE	•		L Chang	e L Addition	
NA	ł					4. 2 NAME					
	REET ADDRESS					4.3 STREET					
	Y-\$T-ZIF				ELETE	4.4 CITY - S	T-ZIP		Chang	e Addition	
M	Į.			D	LLETE	5.1 TITLE	1		□ cuan¢	ie T. Vonition	
NA		i				5.2 NAME	ADDRESS				
1	REET ADORESS					5.3 STREET				1	
TiTI	Y - ST - ZIP			Di	FLETE	5.4 CITY - S 6.1 THILE	1 - ZIP		Chang	e Addition	

14. I do 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 eath; 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.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE NAME

STREET ADDRESS

CITY - ST - ZIP

Tura M. Franke - Tina M. Franke STD

**FILED** 

Jan 22 1997 8:00am

Secretary of State