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Mar 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S65498**

(5)

1. Corporation Name
WAVEKAT PRODUCTIONS, INC.

Principal Place of Business
**525 FENTRESS BLVD.
DAYTONA BEACH FL 32114**

Mailing Address
**P O BOX 2880
DAYTONA BEACH FL 32120-2880
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/05/1991		3a. Date of Last Report 02/13/1996	
21. Suite, Apt. # etc.		26. Suite, Apt. # etc.		4. FEI Number 59-3074122		Applied For ☐ Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. Country		29. Country		30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

**VOGES, WILLIAM J.
525 FENTRESS
DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

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 and undertake with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	DP	1.1 TITLE	☐ Change ☐ Addition
2. STREET ADDRESS	ROOT, CHAPMAN J. II	1.2 NAME	
3. CITY - ST - ZIP	525 FENTRESS BLVD.	1.3 STREET ADDRESS	
4. TITLE	DAYTONA BEACH FL	1.4 CITY - ST - ZIP	☐ Change ☐ Addition
5. NAME	DVST	2.1 TITLE	☐ Change ☐ Addition
6. STREET ADDRESS	VOGES, WILLIAM J.	2.2 NAME	
7. CITY - ST - ZIP	525 FENTRESS BLVD.	2.3 STREET ADDRESS	
8. TITLE	DAYTONA BEACH FL	2.4 CITY - ST - ZIP	☐ Change ☐ Addition
9. NAME		3.1 TITLE	☐ Change ☐ Addition
10. STREET ADDRESS		3.2 NAME	
11. CITY - ST - ZIP		3.3 STREET ADDRESS	
12. TITLE		3.4 CITY - ST - ZIP	☐ Change ☐ Addition
13. NAME		4.1 TITLE	☐ Change ☐ Addition
14. STREET ADDRESS		4.2 NAME	
15. CITY - ST - ZIP		4.3 STREET ADDRESS	
16. TITLE		4.4 CITY - ST - ZIP	☐ Change ☐ Addition
17. NAME		5.1 TITLE	☐ Change ☐ Addition
18. STREET ADDRESS		5.2 NAME	
19. CITY - ST - ZIP		5.3 STREET ADDRESS	
20. TITLE		5.4 CITY - ST - ZIP	☐ Change ☐ Addition
21. NAME		6.1 TITLE	☐ Change ☐ Addition
22. STREET ADDRESS		6.2 NAME	
23. CITY - ST - ZIP		6.3 STREET ADDRESS	
24. TITLE		6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I further 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.

SIGNATURE: William J. Voges **William J. Voges, Director** **3/7/97** **(904) 258-4700**

CR2E034 (9/96)