FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

FILED
95 APR 27 AM 7:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

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

DOCUMENT # V15041 **(9)**

1. Corporation Name
WINTER QUARTER SALES, INC.

Principal Place of Business	Mailing Address
800 KAY ROAD NORTHEAST BRADENTON FL 34202	800 KAY ROAD NORTHEAST BRADENTON FL 34202

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/19/1992
3a. Date of Last Report: 04/12/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: 65-0311555 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
City & State — 23
City & State — 28
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip — 24 Country — 25 Zip — 29 Country — 30
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JERGER, DEAN W.
7785 66TH STREET NORTH
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

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, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	1.1 TITLE		☐ Change ☐ Addition
NAME	JERGER, RICHARD M. SR.	1.2 NAME		
STREET ADDRESS	43 DOLPHIN DR.	1.3 STREET ADDRESS		
CITY-ST-ZIP	TREASURE ISLAND FL	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE		☐ Change ☐ Addition
NAME	JERGER, THOMAS J.	2.2 NAME		
STREET ADDRESS	10305 61ST CT NORTH	2.3 STREET ADDRESS		
CITY-ST-ZIP	PINELLAS PARK FL	2.4 CITY-ST-ZIP		
TITLE	PD	3.1 TITLE		☐ Change ☐ Addition
NAME	JERGER, DEAN W.	3.2 NAME		
STREET ADDRESS	7949 NINTH AVE. SOUTH	3.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP		
TITLE	VD	4.1 TITLE		☒ Change ☐ Addition
NAME	JERGER, RICHARD M.JR.	4.2 NAME		
STREET ADDRESS	~~1835 MONTANA AVE., N.E.~~	4.3 STREET ADDRESS	425 - 79th Street South	
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	St. Petersburg, FL 33707	
TITLE	STD	5.1 TITLE		☐ Change ☐ Addition
NAME	KIPP, LORENE H.	5.2 NAME		
STREET ADDRESS	216 23RD AVENUE N.	5.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 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 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: Dean W. Jerger Dean W. Jerger, President 4/21/95 (813)546-8911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0344810 CP