

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V25285** (0)

1. Corporation Name

W & W OF LAKE COUNTY, INC.



Principal Place of Business

Mailing Address

P.O. BOX 38
HWY 64 E
OAKLAND CITY IN 47660

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HWY 64 E
OAKLAND CITY IN 47660

3. Date Incorporated or Qualified 03/30/1992	3a. Date of Last Report 03/16/1995
4. FEI Number 59-3112987	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principal Place of Business

2a. Mailing Address

21 **616 Lake Dora Dr.**
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

City & State

City & State

23 **TAVARES FL**

28

24 **32778** 25 **FL**

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILDER, DONALD K.
616 LAKE DORA DR.
TAVARES FL 32778**

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

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P D <input type="checkbox"/> DELETE	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILDER, DONALD K.	12 NAME	
STREET ADDRESS	616 LAKE DORA DR.	13 STREET ADDRESS	
CITY-ST-ZIP	TAVARES FL	14 CITY-ST-ZIP	
TITLE	S D <input type="checkbox"/> DELETE	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILDER, MARY ANN	22 NAME	
STREET ADDRESS	616 LAKE DORA DR.	23 STREET ADDRESS	
CITY-ST-ZIP	TAVARES FL	24 CITY-ST-ZIP	
TITLE	V D <input type="checkbox"/> DELETE	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILDER, RICHARD L.	32 NAME	
STREET ADDRESS	224 BFW BLVD.	33 STREET ADDRESS	
CITY-ST-ZIP	BOONVILLE IN	34 CITY-ST-ZIP	
TITLE	T D <input type="checkbox"/> DELETE	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILDER, MELINDA L.	42 NAME	
STREET ADDRESS	224 BFW BLVD.	43 STREET ADDRESS	
CITY-ST-ZIP	BOONVILLE IN	44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
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 119.07(3)(k), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-96

Date

812 749 4411

Daytime Phone #

CR2E034 (12/95)