

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
19936



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

DOCUMENT # V39074 (2)

1. Corporation Name:

W.M. JENNINGS, INC.

Principal Place of Business

229 PENSACOLA ROAD
VENICE FL 34285

Mailing Address

229 PENSACOLA ROAD
VENICE FL 34285

410 KEN KRANZ
WARDURE PINCUS + CO.
466 LEXINGTON AVE N.Y. N.Y. 10017

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 WARDURE PINCUS + CO.

27 466 LEXINGTON AVENUE

28 NEW YORK N.Y.

29 10017

Country

30 USA

9. Name and Address of Current Registered Agent

TRACY, DENNIS J.
229 PENSACOLA ROAD
VENICE FL 34285

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 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

12.

TITLE
NAME
D JENNINGS, WM. MITCHELL
STREET ADDRESS
555 PARK AVE
CITY-STATE-ZIP
NEW YORK NY

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

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29. TITLE

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31. STREET ADDRESS

32. CITY-STATE-ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

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6-10-96
AFB

SIGNATURE: *William M. Jennings, Jr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR