

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V73973** (2)

1. Corporation Name

**TED WOLFF II BUILDING AND REMODELING CONTRACTORS
, INC.**

Principal Place of Business

Mailing Address

6541 ROXBURY DR
SARASOTA FL 34231
US

6541 ROXBURG DR
SARASOTA FL 34231
US

2. Principal Place of Business

21 **3048 Gypsy Street**

Suite, Apt. #, etc.

22

City & State

23 **SARASOTA, FL**

Zip

24 **34231**

Country

25 **SARASOTA**

2a. Mailing Address

26 **3048 Gypsy Street**

Suite, Apt. #, etc.

27

City & State

28 **SARASOTA, FL**

Zip

29 **34231**

Country

30 **SARASOTA**

g. Name and Address of Current Registered Agent

DESJARLAIS, MARY LYNN
8075 SO. BENEVA RD., STE. 6
SARASOTA FL 34238

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 607.0902 and 607.1504, Florida Statutes, the above named corporation submits the 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 607.0904, Florida Statutes.

SIGNATURE *Theodore C Wolff* **THEODORE C WOLFF (PRESIDENT)**

MARCH 29, 1996
(DATE)

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	WOLFF, TED, SR.	
STREET ADDRESS	6541 ROXBURY DR	
CITY - ST - ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change	☐ Addition
14 NAME	
15 STREET ADDRESS	3048 GYPSY STREET
16 CITY - ST - ZIP	SARASOTA, FL. 34231
17 TITLE	☐ Change ☐ Addition
21 NAME	
22 STREET ADDRESS	
23 CITY - ST - ZIP	
24 TITLE	☐ Change ☐ Addition
29 NAME	
30 STREET ADDRESS	
31 CITY - ST - ZIP	
32 TITLE	☐ Change ☐ Addition
37 NAME	
38 STREET ADDRESS	
39 CITY - ST - ZIP	
40 TITLE	☐ Change ☐ Addition
45 NAME	
46 STREET ADDRESS	
47 CITY - ST - ZIP	
48 TITLE	☐ Change ☐ Addition
53 NAME	
54 STREET ADDRESS	
55 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: *Theodore C Wolff* **THEODORE C WOLFF**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/96 (941) 927-3380
(DATE) (PHONE)

CR2E034 (12/95)