

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 AM 11:55

DOCUMENT # P94000021834 (4)

1. Corporation Name

WILFORD ENTERPRISES, INC.

Principal Place of Business

3102 53RD AVE. EAST
BRADENTON FL 34208

Mailing Address

3102 53RD AVE. EAST
BRADENTON FL 34208

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/21/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt., #, etc.

Suite, Apt., #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0488790

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CRAWFORD, STEVEN
3102 53RD AVE. EAST
BRADENTON FL 34208

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

(If Public, sign the printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when registering)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

D
CRAWFORD, STEVEN
3102 53RD AVE. EAST
BRADENTON FL 34208

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D
CRAWFORD, SCOTT
2150 RIVER PLAZA DR.
SACRAMENTO CA 95833

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D
CRAWFORD, JON R
15410 MAGNOLIA WARBLER RD.
BROOKSVILLE FL 34614

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D
BROOKS, KELLY ANNE
5883 KELLY WAY
SACRAMENTO CA 95824

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D
BROOKS, KELLY ANNE
5883 KELLY WAY
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5883 KELLY WAY
SACRAMENTO CA 95824

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I, the hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 110.07(3)(b), 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 in Block 12 or Block 13 if changed, on an attachment, with an address.

SIGNATURE:

Steven Crawford

Steven Crawford

2/10/95 (873) 756-6401

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR