

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90002 044 ***150.00

DOCUMENT # P95000018073

1. Entity Name
2111 WILSON BOULEVARD INC.



Principal Place of Business 1801 HERMITAGE BOULEVARD SUITE 600 TALLAHASSEE, FL 32308	Mailing Address 1801 HERMITAGE BOULEVARD SUITE 600 TALLAHASSEE, FL 32308
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04061433



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01282004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

75-2584802

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVID E. TODD
1801 HERMITAGE BOULEVARD
STE 100
TALLAHASSEE, FL 32308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BENNETT, DOUGLAS W	
STREET ADDRESS	1801 HERMITAGE BLVD., STE 100	
CITY-ST-ZIP	TALLAHASSEE, FL	

TITLE	V	<input type="checkbox"/> Delete
NAME	DALEY, EDWARD	
STREET ADDRESS	8750 N CENTRAL EXPRESSWAY, SUITE 800	
CITY-ST-ZIP	DALLAS, TX 752316437	

TITLE	P	<input type="checkbox"/> Delete
NAME	SMITH, G. ANDREWS	
STREET ADDRESS	8750 N. CENTRAL EXPRESSWAY, SUITE 800	
CITY-ST-ZIP	DALLAS, TX 752316437	

TITLE	VAST	<input type="checkbox"/> Delete
NAME	WEAVER, REGINA	
STREET ADDRESS	8750 N CENTRAL EXWY, SUITE 800	
CITY-ST-ZIP	DALLAS, TX 75231	

TITLE	VS	<input type="checkbox"/> Delete
NAME	FARALDO, MARK	
STREET ADDRESS	8750 N CENTRAL EXPRESSWAY, SUITE 800	
CITY-ST-ZIP	DALLAS, TX 752316437	

TITLE	DVAT	<input type="checkbox"/> Delete
NAME	GRAY, LYNNE M	
STREET ADDRESS	1801 HERMITAGE BOULEVARD, SUITE 600	
CITY-ST-ZIP	TALLAHASSEE, FL 32308	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eric R. Smith	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mark P. Faraldo	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark P. Faraldo Mark P. Faraldo, V, S 3-12-04 2149890800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #