

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K68723

**Entity Name:** TIMOTHY WILCOX, INCORPORATED

**Current Principal Place of Business:**

TIMOTHY WILCOX  
4299 COLLINS AVE.  
MIAMI BCH, FL 33140

**Current Mailing Address:**

TIMOTHY WILCOX  
4299 COLLINS AVE.  
MIAMI BCH, FL 33140 US

**FEI Number:** 65-0154779

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILCOX, TIMOTHY  
4299 COLLINS AVE  
MIAMI BCH, FL 33140 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name WILCOX, TIMOTHY  
Address 4299 COLLINS AVE.  
City-State-Zip: MIAMI BCH FL

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY WILCOX

**PRESIDENT**

**04/30/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date