## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 190331**

Entity Name: WILSONMILLER, INC.

FILED Jan 08, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3200 BAILEY LANE SUITE 200 NAPLES, FL 34105 **Current Mailing Address: New Mailing Address:** 3200 BAILEY LANE SUITE 200 NAPLES, FL 34105 US FEI Number: 59-0761871 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DANCA, GARY L 3200 BAILEY LANE SUITE 200 NAPLES, FL 34105 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition KENNEDY, MICHAEL A Name: Name: 1112 MARIGOLD DR Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: Title: Title: TD () Delete () Change () Addition Name: DANCA, GARY L Name: 4145 PINE RIDGE RD EXT Address: Address: NAPLES, FL 34119 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VD. () Change () Addition DURHAM, TIMOTHY P Name: Name: 3220 70TH ST SW Address: Address: City-St-Zip: NAPLES, FL 34105 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition KEMPER, DAVID Name: Name: Address: 110 HICKORY CREEK DR. Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition WHITE, ARLEN D Name: Name: 9002 HUNTINGTON PT. DR Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: ( ) Delete Title: Title: () Change () Addition REYNOLDS, ALAN D Name: Name: 5540 12TH AVE SW Address: Address: City-St-Zip: City-St-Zip: NAPLES, FL 34116

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GARY L. DANCA TD 01/08/2004