

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

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95 APR 18 PM 6:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 370818 (7)

1. Corporation Name
WILT CONSTRUCTION CORP.

Principal Place of Business 1033 SE 14TH CT DEERFIELD BEACH FL 33441	Mailing Address 1033 SE 14TH CT DEERFIELD BEACH FL 33441
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/06/1970	3a. Date of Last Report 05/01/1994
21	26	4. FEI Number 59-1319183	Applied For <input type="checkbox"/> Not Applicable		
22	27	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**WILT, SCOTT E
8905 S BAY DR
2 SO. ORANGE PLAZA
ORLANDO FL 32819**

10. Name and Address of New Registered Agent

81 Name WILT, EUGENE T.
82 Street Address (P.O. Box Number is Not Acceptable) 1033 SE 14th Ct.
83
84 City DEERFIELD BEACH FL
85 Zip Code 33441

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 Eugene T. Wilt **EUGENE T. WILT PRESIDENT** **04/11/95**

12. OFFICERS AND DIRECTORS

TITLE PD	NAME WILT, EUGENE T.
STREET ADDRESS 1033 S.E. 14TH COURT	CITY ST ZIP DEERFIELD BCH FL
TITLE VSD	NAME WILT, SCOTT E.
STREET ADDRESS 8905 SOUTH BAY DR. Void	CITY ST ZIP ORLANDO FL
TITLE	NAME
STREET ADDRESS	CITY ST ZIP
TITLE	NAME
STREET ADDRESS	CITY ST ZIP
TITLE	NAME
STREET ADDRESS	CITY ST ZIP
TITLE	NAME
STREET ADDRESS	CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE RDS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME WILT, EUGENE T	
13 STREET ADDRESS 1033 SE 14th Ct.	
14 CITY ST ZIP DEERFIELD BEACH, FL 33441	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS None	
24 CITY ST ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY ST ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY ST ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY ST ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 110.07(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 in person; 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: Eugene T. Wilt **EUGENE T. WILT** **4/11/95** **(305)427-0451**