


2005 FOR PROFIT CORPORATION ANNUAL REPORT

CK 21482

FILED

Jan 13, 2005 08:00 AM
Secretary of State

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| DOCUMENT # 392325 1. Entity Name WILK FORWARDING COMPANY |  |
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| Principal Place of Business 2900 EMERSON EXPRESSWAY PO BOX 48220 JACKSONVILLE, FL 32247-8220 US | Mailing Address 2900 EMERSON EXPRESSWAY PO BOX 48220 JACKSONVILLE, FL 32247-8220 US |
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01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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|---|--------------------------------|
| 4. FEI Number 59-1368939 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

WILK, JOHN J
2900 EMERSON EXPWY
JACKSONVILLE, FL 32207

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees


10. OFFICERS AND DIRECTORS

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|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD WILK, JOHN J. 2900 EMERSON EXPRESSWAY JACKSONVILLE, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD WILK, JAMES H. 2900 EMERSON EXPRESSWAY JACKSONVILLE, FL |
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01/13/05-80024-022 150.00

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IN THIS SPACE**

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:  JAMES H. WILK 1/11/05 (904) 346-3550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #