## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 437517**

DOCUMENT # 437517  1. Entity Name  EARL K. WILSON INC.				Mar 08, 2000 8:00 an Secretary of State		
				03-08-2000 90018		
Principal Place of Business		Mailing Address				
3200 N. W. 107TH AVENUE CORAL SPRINGS FL 33065		3200 N. W. 107TH AVENUE CORAL SPRINGS FL 33065-3631				
2. Principal Place of Bu	siness	3. Mailing Address				
3200 NW 107 AUE		3200 NW 107 AVE			1411 B1011 B1811 B1811 B1811 1881 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS	S SPACE	
City & State CORAL, SPRINGS FL		City & State CORAL SPRINGS FL		4. FEI Number 59-1485058	Applied For Not Applicable	
Zip 33065	Country BROWARD	Zip 33065	Country BROWARD	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		
	_		- Name			
BLAKE, WALTER R ESQ 1881 UNIVERSITY DR.			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
CORAL SPRIM	NGS FL 33071		City	F	Zip Code	
8. The above named en	ntity submits this statement f	or the purpose of changing	its registered office or regis	tered agent, or both, in the State of Florida.		
SIGNATURE			OTC Desired Assessment of the Control of the Contro	ired when reinstatino) DATE		
Signature, typ	ped or printed name of registered ager	it and little if applicable. (N	OTE: Registered Agent signature requ	red when reinstating) DATE		
9. This corporation is e	ligible to satisfy its Intangib	e FILE NOV	W!!! FEE IS \$150.00	10. Election Campaign Financing	\$5.00 May Be	

Zip Code \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE NAME WILSON, EARL K JR STREET ADDRESS STREET ADDRESS 3200 NW 107TH AVENUE CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME WILSON, BARBARA P STREET ADDRESS STREET ADDRESS 3200 NW 107TH AVENUE CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL 33065** ☐ Addition ☐ Celete TITLE Change VP. TITLE NAME NAME WILSON, EARL S STREET ADDRESS STREET ADDRESS 3200 NW 107TH AVE .--CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: \_

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

REARCIK, WILSON SR. 2-28-2000

☐ Delete

□ Delete

752 - 5929

Change

Change

Addition

Addition

**FILED**