

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 647708

1. Entity Name
WILCLAN FARMS, INC.

FILED
Jun 02, 2001 8:00 am
Secretary of State

06-02-2001 90009 003 ***550.00

Principal Place of Business

1200 GARVEY RD., S.W.
PALM BAY FL 32908

Mailing Address

1200 GARVEY RD., S.W.
PALM BAY FL 32908

2. Principal Place of Business

~~1200 Garvey Rd S.W.~~
1200 Garvey Rd. S.W.
Suite, Apt. #, etc.

3. Mailing Address

~~1200 Garvey Rd S.W.~~
1400 Garvey Rd S.W.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm Bay, Fla.

City & State

Palm Bay, Fla.

4. FEI Number

59-1983905

Applied For

Not Applicable

Zip

32908

Country

Brevard

Zip

32908

Country

Brevard

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, ELIZABETH C
1200 GARVEY ROAD S.W.
PALM BAY FL 32908

7. Name and Address of New Registered Agent

Name
Susan W. Leonard
Street Address (P.O. Box Number is Not Acceptable)
1400 Garvey Rd. S.W.

City

Palm Bay, Fla.

FL

Zip Code

32908

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.

SIGNATURE Paul Williams

Signature, typed or printed name of registered agent and title if applicable.

(NOT

Registered Agent signature required when reinstating)

May 29, 2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

FILE NOW! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PSTD	<input checked="" type="checkbox"/> Delete
NAME	WILLIAMS, ELIZABETH	
STREET ADDRESS	1200 GARVEY RD., S.W.	
CITY - ST - ZIP	PALM BAY FL 32908	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WILLIAMS, PAUL D	
STREET ADDRESS	1400 GARVEY RD., S.W.	
CITY - ST - ZIP	PALM BAY FL 32908	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WILLIAMS, DANIEL L	
STREET ADDRESS	1400 GARVEY ROAD, S.W.	
CITY - ST - ZIP	PALM BAY FL 32908	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSTD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Susan W. Leonard		
STREET ADDRESS	1400 Garvey Rd. S.W.		
CITY - ST - ZIP	Palm Bay, Fla. 32908		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY - ST - ZIP			

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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Paul Williams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER - DIRECTOR

May 29, 2001

Date

(321) 727-7092

Daytime Phone #

CR2E034 (10/00)