

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 660576 (0)
1. Corporation Name
WILSON FINANCIAL CORPORATION



Principal Place of Business
7800 BELFORT PKY. #100
PO BOX 18030
JACKSONVILLE FL 32247-7529
US

Mailing Address
7800 BELFORT PKY. #100
PO BOX 18030
JACKSONVILLE FL 32247-7529
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
3. Date Incorporated or Qualified		4. FEI Number	
03/25/1980		59-2006064	
5. Certificate of Status Desired		Applied For	
<input type="checkbox"/>		Not Applicable	
6. Election Campaign Financing		8. This corporation owes or has paid the current year Intangible	
Trust Fund Contribution		Personal Property Tax due June 30.	
<input type="checkbox"/>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Additional Fee Required		9. May Be Added to Fees	
\$8.75		\$5.00	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
KIRSCHNER, MAIN, PETRIE, GRAHAM & TANNER ONE INDEPENDENT DR SUITE 2000 JACKSONVILLE FL 32202		81 Name Holland Knight	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

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 *T. Malcolm Graham* *6/29/98*
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, J. STEVEN	1.2 NAME	
STREET ADDRESS	7800 BELFORT PKY. #100	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, COURTNEY SANDS	2.2 NAME	
STREET ADDRESS	7800 BELFORT PKWY.	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	
TITLE	VAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRSCHNER, KENNETH M.	3.2 NAME	
STREET ADDRESS	ONE INDEPENDENT DR #2000	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	
TITLE	VAS	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SALEM, EDWARD B	4.2 NAME	
STREET ADDRESS	7800 BELFORT PKWY #100	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAY, CATHERINE J	5.2 NAME	
STREET ADDRESS	7800 BELFORT PKWY 100	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *T. Malcolm Graham* *6/29/98*

CR2E034 (10/97)