2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# 724242

Entity Name: THE B.J. AND EVE WILDER FAMILY FOUNDATION, INC.

Current Principal Place of Business:

10530 NW 15TH PL
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

10530 NW 15TH PL
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 23-7290166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILDER, B J
10530 NW 15TH PL
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	WILDER, B J	
Address:	10530 NW 15TH PL	
City-St-Zip:	GAINESVILLE, FL 32606 US	
Title:	STD	( ) Delete
Name:	WILDER, EVELYN	
Address:	10530 NW 15TH PL	
City-St-Zip:	GAINESVILLE, FL 32606 US	
Title:	DV	( ) Delete
Name:	SCOTT, KAREN	
Address:	12 BUSHY RIDGE RD	
City-St-Zip:	WESTPORT, CT 06880	
Title:	DV	( ) Delete
Name:	WILDER, B J JR	
Address:	5929 NW 83RD TER	
City-St-Zip:	GAINESVILLE, FL 32653	
Title:	D	( ) Delete
Name:	NICHOLAS, TERRY W	
Address:	179 SAN JUAN DRIVE	
City-St-Zip:	PONTE VEDRA, FL 32082	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN V. WILDER STD 05/01/2009
Electronic Signature of Signing Officer or Director — Date