

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 828956 (3)

1. Corporation Name

H.J. WILSON CO INC



Principal Place of Business

7100 SERVICE MERCHANDISE DR  
PO BOX 24800  
NASHVILLE TN 37202

Mailing Address

7100 SERVICE MERCHANDISE DR  
PO BOX 24800  
NASHVILLE TN 37202

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	Country
24	Country	29	Zip
25		30	

3. Date Incorporated or Qualified  
11/06/1972

3a. Date of Last Report  
04/24/1995

4. FEI Number  
72-0591801

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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

Signature typed or printed name of registered agent of the corporation

Signature typed or printed name of registered agent of the corporation

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
	COBO	ZIMMERMAN, RAYMOND	7100 SVC MERCHANDISE DR BRENTWOOD TN	<input type="checkbox"/> DELETE			
	S	BODZY, GLEN	7100 SVC MERCHANDISE DR BRENTWOOD TN	<input type="checkbox"/> DELETE			
	V	CUSANO, SAM	7100 SVC MERCHANDISE DR BRENTWOOD TN	<input type="checkbox"/> DELETE			
	AT	ADAMS, DONNA	7100 SVC MERCHANDISE DR BRENTWOOD TN	<input type="checkbox"/> DELETE			
	P	WITKIN, GARY	7100 SVC MERCHANDISE DRIVE BRENTWOOD TN	<input type="checkbox"/> DELETE			
				<input type="checkbox"/> DELETE			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Donna M. Adams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donna Adams

615-660-3302

DATE

Original Phone #

CR2E034 (12/95)