## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #857449**

1. Entity Name

H.C. WILKINSON COMPANY



FILED Jan 31, 2007 08:00 AM Secretary of State

Principal Place of Business

1818 S PATTERSON ST VALDOSTA, GA 31601 Mailing Address

P. O. BOX 1791 VALDOSTA, GA 31603

US



01222007

No Chg-P

CR2E034 (11/05)

4. FEI Number 58-1090971 Applied For Not Applicable

5. Certificate of Status Desired

. .

\$8.75 Additional Fee Required

6.	Name	and.	Address o	r Current	Registe	red Agent

DO NOT WRITE IN THIS SPACE

HUGHEY, JAMES FREDERICK 558 NE DUSTY MILLER AVENUE MADISON, FL 32340

## DO NOT WRITE IN THIS SPACE

		1			
5. The above the obligat	named entity submits this statement for the plans of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title if	f applicable. (NOTE, Registered	Agent signalare	enquired when reinstating)	DATE
	E NOWIII FEE 18 \$150.00 ay 1, 2007 Fee will be \$550.00	<ol> <li>Election Campaign Finance Trust Fund Contribution.</li> </ol>	cing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARTER, EVELYN 3519 HWY US 41 SOUTH VALDOSTA, GA 31606				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARTER, JIMMY L SR 3519 HWY US 41 SOUTH VALDOSTA, GA 31606				000000614266 02/06/07-80019-007 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARTER, STEPHEN L 3519 HWY US 41 SOUTH VALDOSTA, GA 31606			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CARTER, GUY L 3525 HWY US 41 S VALDOSTA, GA 31606	\		IN	THIS SPACE
TITLE NAME STREET ACCRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					<del></del> .

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

J. m my L. CAPTER Sec.

SIGNATURE:

CITY-ST-7/P

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

President

1/22/07

229-244-0461