

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F45960

Entity Name: J. WILCOXEN, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

RT 1 WALSTON RD
P O BOX 1800
ARCADIA, FL 33821

New Principal Place of Business:

1337 S.E. WALSTON AVENUE
ARCADIA, FL 34266

Current Mailing Address:

RT 1 WALSTON RD
P O BOX 1800
ARCADIA, FL 34265

New Mailing Address:

P.O. BOX 1800
ARCADIA, FL 34265

FEI Number: 59-2133756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEEKIN, JOHN CHARLES
21202 OLEAN BLVD., STE C-2
PT CHARLOTTE, FL 33952 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILCOXEN, JOHN E,
Address: HWY 70 EAST, JACKS RD
City-St-Zip: ARCADIA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILCOXEN, JOHN E,
Address: 5923 S.E. HIGHWAY 70
City-St-Zip: ARCADIA, FL 34266

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN E. WILCOXEN

PD

04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date