

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Bureau of Corporations
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # F94000000327 (6)

MIKE WILLS EXCAVATING & TRUCKING, INC.

**APPROVED
AND
FILED**

6 MAY 23 2:10:15

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Office (If Different) **Mailing Address**
13220 WHITEHAVEN LANE, APT. 1406 **13220 WHITEHAVEN LANE, APT. 1406**
FORT MYERS FL 33912 **FORT MYERS FL 33912**

DATE FIRST FILED IN THIS SPACE

2. Principal Office (If Different)	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

3. Date of Report (If Different)	3a. Date of Last Report
01/24/1994	
4. FIC Number	Applied for
38-2980316	Not Applicable
5. Certificate of Status Issued	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. Does corporation have liability for campaign contributions under Florida Statutes	☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLS, DONNA
13220 WHITEHAVEN LANE, APT. 1406
FORT MYERS FL 33912

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
Page Mobile Village / 4944 Cleveland Avenue A-39
83
84 City
Fort Meyers
FL
85 Zip Code
33907

11. I, the undersigned, in compliance with Sections 607.04(1) and 607.11(1)(b), Florida Statutes, the above named corporation, submit 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.04(1)(b), Florida Statutes.

SIGNATURE

Signature of Agent or Officer or Director of Corporation

Signature of Registered Agent or Officer or Director of Corporation

ATTEST

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND FILING CHANGES	
12a	CDP WILLS, MIKE P.O. BOX 842 N/A GWINN MI 49841	13a	☐ Change ☐ Addition
12b	CVD WILLS, SHERI C P.O. BOX 842 N/A GWINN MI 49841	13b	☐ Change ☐ Addition
12c	Y WILLS, DONNA 13220 WHITEHAVEN LANE, APT. 1406 FT. MYERS FL 33912	13c	☐ Change ☐ Addition
12d		13d	☐ Change ☐ Addition
12e		13e	☐ Change ☐ Addition
12f		13f	☐ Change ☐ Addition
12g		13g	☐ Change ☐ Addition
12h		13h	☐ Change ☐ Addition
12i		13i	☐ Change ☐ Addition
12j		13j	☐ Change ☐ Addition
12k		13k	☐ Change ☐ Addition
12l		13l	☐ Change ☐ Addition
12m		13m	☐ Change ☐ Addition
12n		13n	☐ Change ☐ Addition
12o		13o	☐ Change ☐ Addition
12p		13p	☐ Change ☐ Addition
12q		13q	☐ Change ☐ Addition
12r		13r	☐ Change ☐ Addition
12s		13s	☐ Change ☐ Addition
12t		13t	☐ Change ☐ Addition
12u		13u	☐ Change ☐ Addition
12v		13v	☐ Change ☐ Addition
12w		13w	☐ Change ☐ Addition
12x		13x	☐ Change ☐ Addition
12y		13y	☐ Change ☐ Addition
12z		13z	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(9)(b), Florida Statutes. I further certify that the information included 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 registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1, or Block 1 (if changed) or on an attachment with an address.

SIGNATURE: X

SIGNATURE AND TITLE OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Sheri Curtice - Wills

5-15-95

346-4410
346-7000