FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F97000003680 (2) DOCUMENT #

WILTON LAKELAND G.P. CORP.

FILED May 12 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Addre	85		_			
11022 SANTA	MONICA BLVD., STE. 450	11022 SANTA	MONICA BLVD	., STE. 49	50			
LOS ANGELES	S CA 90025	LOS ANGELE	S CA 90025			DO NOT MUITE IN THE ODACE		
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 07/15/1997		
2. Principal Pl	ace of Business	2a. Mailing Ad	dress			4. FEI Number Applied	For	
21		26				95-4637785 Not App	licable	
Suite, Apt. #, etc		Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Addition	onal	
22		27	1			5. Certificate of Status Desired Fee Require	d	
City & State		City & Stat	City & State			Election Campaign Financing \$5.00 May	Be	
23		28	28			Trust Fund Contribution		
Zip	Country	Ziρ		Country		8. This corporation owes or has paid the current year Intangib	te	
24	25	29	30	<u> </u>		Personal Property Tax due June 30. 🔲 Yes 🔛 No		
	9. Name and Address of Curre	ent Registered Agen	<u> </u>			10. Name and Address of New Registered Agent		
	CORPORATION SYSTEM			81	Name			
1200 SOUTH PINE ISLAND ROAD				82	Street A	ddress (P.O. Box Number is Not Acceptable)		
PLA	INTATION FL 33324							
				83				
				84	City	85 Zip Code		
					City	FL 85 Zip Code	į	
11. Pursuant t	to the provisions of Sections 607.05	o02 and 607.1508, Flo	orida Statutes,	the abov	e-named c	corporation submits this statement for the purpose of changing its regi	stered	
office or re agent. Las	egistered agent, or both, in the Staten fam iliar with, and accept the obli	te of Florida, Such ch idations of, Section 60	ange was auth 07.0505. Florida	iorized by a Statule:	/ the corpo 3.	corporation submits this statement for the purpose of changing its regionation's board of directors. I hereby accept the appointment as register	ered	
SIGNATURE								
SIGNATIONE .	Signature, typed or pholed harise of registered a	gent and title if applicable	(NO1f : Re	gistered Age	nt signature re	equired when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	DPST		DELETE	1.1 TITLE	1	☐ Change	Addition 3	
NAME	WILTON, JAY H			1.2 NAME			;	
STREET ADDRESS	11022 SANTA MONICA BLV	D., STE. 450		1.3 STREE1	ADDRESS		١	
CITY-ST-ZIP	LOS ANGELES CA 90025			1.4 CITY - 5	T-ZIP			
TITLE			DELETE	2 1 TITLE		☐ Change ☐	Addition C	
NAME				2.2 NAME	-			
STREET ADDRESS				2.3 STREET	ADDRESS	**		
CITY-ST-ZIP				2. 4 CITY -	ST-ZIP			
TITLE			DELETE	3.1 TITLE		☐ Change ☐	Addition	
NAME				3.2 NAME	J		J	
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY-5	ST-ZIP			
TITLE			DELETE	4.1 TITLE		☐ Change ☐	Addition	
NAME				4. 2 NAME				
STREET ADDRESS				4 3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-S	T - ZIP		-	
TITLE			DELETE	5.1 THEE		☐ Change	Addition	
NAME				5.2 NAME	-	-	- 1	
STREET ADDRESS				5 3 STREET	ADDRESS			
CITY-ST-ZIP				5.4 CITY - S			- [
TITLE			DELETE	6.1 11TLE	1-611	Change	Addition	
NAME				6.2 NAME				
J					ADDRESS		- 1	
STREET ADDRESS				6.3 STREET			1	
CITY-ST-ZIP				6.4 CITY - S	T-ZIP			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied ental 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 of 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 in an attrichment with an address. 4-27-98 (310) 444-6377