

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

04-13-2005 90033 011 \*\*\*150.00

**DOCUMENT # H00220**

Entity Name  
**W.E. WILCOX CONSTRUCTION COMPANY, INC.**



Principal Place of Business

**267 JOHN KNOX RD.  
SUITE 100  
TALLAHASSEE, FL 32303 US**

Mailing Address

**267 JOHN KNOX RD.  
SUITE 100  
TALLAHASSEE, FL 32303 US**

**DO NOT WRITE IN THIS SPACE**



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2411180**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**COX, W. EUGENE  
267 JOHN KNOX RD SUITE 100  
TALLAHASSEE, FL 32303**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*W. Eugene Wilcox*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	WILCOX, W. EUGENE
STREET ADDRESS	6986 HEARTLAND CIR
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	ST
NAME	WILCOX, SHARON
STREET ADDRESS	6986 HEARTLAND CIR
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	V
NAME	WILCOX, JAMES E
STREET ADDRESS	7120 TOWNER TRACE
CITY-ST-ZIP	TALLAHASSEE, FL 32312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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 607, 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.

**SIGNATURE.**