

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

FILED

APPROVED AND FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-1-95

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H38605**

(2)

1. Corporation Name
WILMAR SUPPLY, INC.

Previous Name of Business
**1435 KUMQUAT LANE
JACKSONVILLE FL 32259**

Current Name
**1435 KUMQUAT LANE
JACKSONVILLE FL 32259**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification
01/17/1985

3a. Date of Last Report
05/01/1994

2. Principal Office of Business
21

2a. Mailed Address
26

4. FEI Number
59-2490812

Applied For
☐ Not Applicable

State of Office
22

State of Mailed Address
27

5. Certificate of Status Desired
☐ **\$8.75 Additional Fee Required**

City & State
23

City & State
28

6. Election Campaign Financing
Trust Fund Contribution
☐ **\$5.00 May Be Added to Fees**

Zip
24

Zip
29

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes.
☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DOYLE, WILLIAM E.
1200 GULF LIFE DR #700
JACKSONVILLE FL 32202**

81 Name
Wright, Mary Ann
82 Street Address (P.O. Box Number is Not Acceptable)
1435 Kumquat Ln
83 City
Jacksonville, FL
84 City
FL
85 Zip Code
32259

11. Pursuant to the provisions of Sections 607.0902 and 607.1508, Florida Statutes, the above named corporation submits 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE
Mary Ann Wright

5-1-95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1. TITLE
P
2. NAME
WRIGHT, LESLIE WOODWARD
3. STREET ADDRESS
1435 KUMQUAT LANE
4. CITY & STATE
JACKSONVILLE FL
5. TITLE
T
6. NAME
WRIGHT, MARY ANN
7. STREET ADDRESS
1435 KUMQUAT LANE
8. CITY & STATE
JACKSONVILLE FL
9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY & STATE

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY & STATE

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY & STATE

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY & STATE

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY & STATE

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY & STATE

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY & STATE

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY & STATE

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 190.02(b)(6), Florida Statutes. I further certify that the information submitted 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 receiver or trustee empowered to make this report as required by Chapter 407, Florida Statutes, and that my office appears on Block 12 or Block 13 of this changed corporation attachment with an address.

SIGNATURE: *Mary Ann Wright*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

5-1-95 (904) 257-2992

APPROVED
AND
FILED

7:57

(3)

THE GARDEN STORE, INC.

MR JOHN B. WELLS
1440 S.W. ISABEL RD. OESTE
BOCA RATON FL 33486

[illegible]

3. Date of Appointment + Dismissal	3a. Date of Last Request
01/22/1985	05/01/1994

4. Filing Method	Applicant For
59-2482279	Not Applicable

5. Certificate of Status (Attach) ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
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[illegible]

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

01	10/1/1994
----	-----------

02	Street Address of (1) Person Applying for Not Accredited
----	--

100%	100%
------	------

04	City
----	------

FL

05	2000
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[illegible]

2014年11月

13. ADDITIONAL CHANGES TO COLLECTORS AND DIRECTORIES IN 1971

D
WELLS, JOHN B.
1440 SW ISABEL RD OESTE
BOCA RATON FL

Case	Age	Sex	Duration	Location	Findings
1	25	M	10 years	USA	Small, well-circumscribed, nodular, tan-colored lesion on the lower lip.
2	35	F	5 years	USA	Large, well-circumscribed, nodular, tan-colored lesion on the lower lip.
3	45	M	15 years	USA	Small, well-circumscribed, nodular, tan-colored lesion on the lower lip.
4	55	F	20 years	USA	Large, well-circumscribed, nodular, tan-colored lesion on the lower lip.
5	65	M	25 years	USA	Small, well-circumscribed, nodular, tan-colored lesion on the lower lip.
6	75	F	30 years	USA	Large, well-circumscribed, nodular, tan-colored lesion on the lower lip.
7	85	M	35 years	USA	Small, well-circumscribed, nodular, tan-colored lesion on the lower lip.
8	95	F	40 years	USA	Large, well-circumscribed, nodular, tan-colored lesion on the lower lip.

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

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[illegible]

Figure	Figure
Figure 1	Figure 2

[illegible]

14. The Party would that the information requested with this, thing is voluntarily furnished and does not equally for the response stated as law to the Party, though in the standard, together with, that the information submitted in the request report or suggested that report is true and accurate and that the, separate shall have the same legal effect as if made under oath. And there are also a choice of the completion of the request or failure to respond to the request is required to answer the request as required by Chapter 101, Twenty Chapters, and that no agency or branch of the United States Government is to be held liable for any failure to comply with this request.

SIGNATURE:

SIGNATURE AND FULLY PRINTED NAME OF DIRECTOR OF REGIONAL DIRECTOR

Apr 29 95 407.392.643B

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mayfield Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H39842 (0)

1. Corporation Name:
DELAND, FLORIDA AIRSPORTS, INC.

Principal Place of Business:	Mailing Address:
% ROBERT HALLETT 1600 FLIGHTLINE BLVD. DELAND FL 32724	% ROBERT HALLETT 1600 FLIGHTLINE BLVD. DELAND FL 32724

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Qualified:	3a. Date of Last Report:
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		01/28/1985	05/01/1994
22. City & State:		27. City & State:		4. FET Number:	Applying For:
23. Zip:		28. Zip:		59-2875796	Not Applicable
24. Country:		29. Country:		5. Certificate of Status Desired:	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution:	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under the 1994 Florida Statutes: ☐ Yes ☒ No					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HALLETT, ROBERT 1600 FLIGHTLINE BLVD. DELAND FL 32724				81. Name:			
				82. Street Address (P.O. Box Number is Not Acceptable):			
				83. City:			
				84. State: FL			

11. Pursuant to the provisions of Sections 607.04(2) and 607.1408, Florida Statutes, the above named Corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Each change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.

SIGNATURE: _____ Date: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
NAME	ADDRESS	NAME	ADDRESS
PDV HALLETT, ROBERT 1600 FLIGHTLINE BLVD. DELAND FL		1. NAME	☐ Change ☐ Addition
STD HARP, CATHERINE 1600 FLIGHTLINE BLVD. DELAND FL		2. NAME	☐ Change ☐ Addition
		3. NAME	☐ Change ☐ Addition
		4. NAME	☐ Change ☐ Addition
		5. NAME	☐ Change ☐ Addition
		6. NAME	☐ Change ☐ Addition
		7. NAME	☐ Change ☐ Addition
		8. NAME	☐ Change ☐ Addition
		9. NAME	☐ Change ☐ Addition
		10. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the meeting date stated in Sections 607.04(2) and 607.1408, Florida Statutes. I further certify that the information was adopted by the corporation's board of directors and that my signature shall have the same legal effect as if made by the corporation. I am an officer or director of the corporation or the majority of the corporation's board of directors and I am authorized to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:  **5-1-95 904 288 3539**

BIOGRAPHIC AND TYPED OR PRINTED NAME OF DIRECTOR, OFFICER OR DIRECTOR