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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 25, 1999 8:00 am Secretary of State

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1. Corporation Name

WICKS CONSULTING SERVICES, INC.

2. Principal Place of Blusiness 2. 2a. Mailing Address 9. 2b. Subject April 2b. Subj			and the state of t		न स्थापन स्थापन	
225 W LAMN ST TAVARES FL 32778	Principal Place	e of Business	Mailing Address	<u> </u>	-	- C CONTISE OCOS CENTO CONTO PRÍSES EN ON SOFT BURIL OCONT BURIL B
TAVARES FL 32778 Substance of Business 2. Principal Piece of Business 2. Principal Piece of Business 2. Principal Piece of Business 3. Done incorporated or Qualified 10/20/1986 3. Done incorporated or Qualified 10/20/1986 3. Substance of Business 3. Substance of Business 3. Substance of Substance of Business 3. Substance of Substance of Business 3. Substance of Substance			·			
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2. Principal Place of Business 2a. Mailting Address 4. FEI Number	US		us			
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S. Certificate of Status Desired Fee Required	21	·				00 2100201
City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & State City & Country City & Country City & Country City & Country City &	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			
Ze	22	<u> </u>				
Zip		•	— ·			1 - 1 - 1
Personal Property Tax.	23			Countr		
9, Name and Address of Current Registered Agent WICKS, KENNETH 225 W MAIN ST TAVARES FL 32778 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807 0502 and 807 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Sections 607 0505. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Section 07505. Florida Statutes. SIGNATURE 12.			·	Country	y	
WICKS, KENNETH 225 W MAIN ST TAVARES FL 32778 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, arm familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, agent agent, and the floridates authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, agent agent, and the floridates authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, agent agent agent agent and the floridates. I hereby accept the appointment as registered agent, agent	24					Totalian Toparty Tax
WICKS, KENNETH 225 W MAIN ST TAVARES FL 32778 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 897.0502 and 697.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Statutes. SIGNATURE 30 OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE PST. OFFICERS AND DIRECTORS 12. NAME 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. NAME 13. STREET ADDRESS 13. STREET ADDRESS 14. COTY 51.72P 14. COTY 51.72P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. Change Addition NAME 18. STREET ADDRESS 19. Change Addition NAME 19. STREET ADDRESS 19. Change Addition 19. STREET ADDRESS 19. Change Addition 19. STR	 	g. Name and Address or Curi	ent Registered Agent	81	Name	10. Name and Address of Not Registered Specific
225 W MAIN ST TAVARES FL 32778 14	Wici	KS KENNETH				
TAVARES FL 32778 83 64 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 807.0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section Sections Seathless. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PST WICKS, KENNETH 12. NAME 12. NAME 12. NAME PST WICKS, KENNETH 12. NAME 13. SIRECT ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CITY ST. 2P TAVARES FL 32778 15. SIRECT ADDRESS 16. Change Addition 16. TAVARES FL 32778 16. Change Addition 17. ST. 2P 18. Change Addition 18. SIRECT ADDRESS 18. SIREC				82	Street Addr	ress (P.O. Box Number is Not Acceptable)
11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and size if applicable. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PST WICKS, KENNETH 12. NAME 12. NAME 12. NAME 13. SIRRET ADDRESS CITY-ST-2P 14. CITY-ST-2P 14. CITY-ST-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. NAME 19. SIRRET ADDRESS 14. CITY-ST-2P 14. CITY-ST-2P 15. TITLE 10. DELETE 21. TITLE 22. NAME 23. SIRRET ADDRESS 24. CITY-ST-2P 24. CITY-ST-2P 25. NAME 34. CITY-ST-2P 26. Change Addition 26. Change Addition 27. NAME 38. SIRRET ADDRESS 28. CITY-ST-2P 39. SIRRET ADDRESS 40. CITY-ST-2P 40. Change Addition 40. SIRRET ADDRESS 40. CITY-ST-2P 50. SIRRET ADDRESS 51. SIRRET ADDRESS 51. SIRRET ADDRESS 52. NAME 53. SIRRET ADDRESS 54. CITY-ST-2P 55. TITLE 55. TITLE 56. SIRRET ADDRESS 57. SIRRET ADDRESS 57. SIRRET ADDRESS 58. CITY-ST-2P 59. SIRRET ADDRESS 59. SIRRET ADDRESS 50. SIRRET ADDRESS 50				ġ.	 	- PPM Mary -
11. Pursuant to the provisions of Sections 607.0502 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. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12.	100	AILO I E GEITO		0.	Ί	
11. Pursuant to the provisions of Sections 607.0502 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 Statu of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Statu of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and marrial marrial and accept the obligations of, Section 607.0502. Florida Statutes. SIGNATURE 12.	}			84	City	85 Zip Code
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director's. Trieflety study in the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of director's. Trieflety study in the appointment as registered agent, and store if agentation. STORATURE					1	• - 1 1
SIGNATURE Sign	l office or r	egistered agent or both in the Sta	te of Florida. Such change was autho	nzed D\	/ the corporation	ion's board of directors. I hereby accept the appointment as registered
Significants typed or printed name of registrated agent and steel if applicable. (NOTE Registrated Agent sequenced Agent s		m Izmilai witii, and accept the con	gallons on, occitor sorricoso, rismaa	Otaleta		
12.	SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE: Reg	istered Age	ent signature require	ed when reinstating) DATE
TITLE	12.			13.		
STREET ADDRESS 225 W MAIN ST 13 STREET ADDRESS 14 CITY-ST-ZIP TAVARES FL 32778		PST	☐ DELETE	1.1 TITLE		Change Addition
STREET ADDRESS CITY_ST_ZIP	NAME	WICKS, KENNETH		1.2 NAME		
TAVARES FL 32778	STREET ADDRESS			1.3 STREE	ET ADDRESS	
TITLE	CITY-ST-ZIP			1.4 CITY-	ST-ZIP	
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CA OPEN OT 71D	4.77			6.3 STREE	ETADDRESS	
CITY-ST-7IP 1	CITY-ST-ZIP			6.4 CITY-	ST-ZIP	

14. 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 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNET HE WITCHES POSSIBLE TO THE PROPERTY OF THE PROPERTY O

322/99

352-343-8667

Daytime Phone #