

APPROVED
AND
FILED

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

95 APR -7 PM 1: 13

STATE
FLORIDA

1. Corporation Name

WedgeWood Willows, Inc.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Organized: _____

Date of Last Report

588-

4. FBI Number
60-280554-3

Applied Eng

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

8. Election Campaign Financing

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

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

Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81	Name	Barbara J. Petroski
82	Street Address (P.O. Box Number is Not Acceptable)	100 W. Lucerne Circle
83		Suite 504
84	City	Princeton

FL	85	Zip Code 32802
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11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 a registered agent, I am familiar with, and accept the obligations of Florida Statutes.

SIGNATURE

3-31-95

Index

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[illegible]

13.		ADDIT./NS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 1 TITLE	P	☒ Change	☐ Addition
12 NAME	Finley Hamilton		
13 STREET ADDRESS	2120 South 1300 East, #101		
14 CITY-ST-ZIP	Salt Lake City, UT 84106		
2 1 TITLE	P/P	☒ Change	☐ Addition
2 2 NAME	Marilyn Peterson		
2 3 STREET ADDRESS	2120 South 1300 East, #101		
2 4 CITY-ST-ZIP	Salt Lake City, UT 84106		
3 1 TITLE	S	☒ Change	☐ Addition
3 2 NAME	Jennifer Tobler		
3 3 STREET ADDRESS	2120 South 1300 East, #101		
3 4 CITY-ST-ZIP	Salt Lake City, UT 84106		
4 1 TITLE		☐ Change	☐ Addition
4 2 NAME	400001452044		
4 3 STREET ADDRESS	-04/10/95--01043--014		
4 4 CITY-ST-ZIP	***200.00 ****200.00		
5 1 TITLE		☐ Change	☐ Addition
5 2 NAME			
5 3 STREET ADDRESS			
5 4 CITY-ST-ZIP			
6 1 TITLE		☐ Change	☐ Addition
6 2 NAME			
6 3 STREET ADDRESS			
6 4 CITY-ST-ZIP			

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 111(f)(3)(A), Florida Statute. 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 a officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jennifer Tobler Jennifer Tobler, Sec. 3/31/95 801-487-4048

AW 4-7-95