

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K92729

1. Entity Name
WI-CO, INC.



FILED
Jan 18, 2005 08:00 AM
Secretary of State

Principal Place of Business

C/O JOHN H. WILLIAMS JR.
660 NORTH CITRUS AVENUE
CRYSTAL RIVER, FL 34428 US

Mailing Address

C/O JOHN H. WILLIAMS JR.
PO. BOX 381
CRYSTAL RIVER, FL 34423 US



01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2951407

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILLIAMS, JOHN H. JR.
660 NORTH CITRUS AVENUE
CRYSTAL RIVER, FL 34428

**DO NOT WRITE
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

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 WILLIAMS, JOHN H. JR.
STREET ADDRESS 660 NORTH CITRUS AVENUE
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE V
NAME WILLIAMS, DINAH
STREET ADDRESS 660 NORTH CITRUS AVENUE
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE V
NAME WILLIAMS, LOUIS J.
STREET ADDRESS 1101 ROLLING WOODS LANE
CITY-ST-ZIP LAKELAND, FL

TITLE ST
NAME WILLIAMS, JOHN H. JR.
STREET ADDRESS 660 NORTH CITRUS AVENUE
CITY-ST-ZIP CRYSTAL RIVER, FL 34428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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:

Dinah D. Williams, Vice Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-05

Date

352-795-5280

Daytime Phone #