## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # L44558**

1. Entity Name WILCOXSON ENTERPRISES, INC.



**FILED** Feb 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

5302 SUSON LANE FT. PIERCE, FL 34951 US 5302 SUSON LANE

FT. PIERCE, FL 34951

US



## DO NOT WRITE IN THIS SPACE

02172007 No Chg-P CR2E034 (11/05)

Applied For 4. FEI Number Not Applicable 65-0170106 \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

WILCOXSON, DOUGLAS G. 5302 SUSON LANE FT. PIERCE, FL 34951

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>					
SIGNATURE					
	È NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ     Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD WILCOXSON, DOUGLAS G. 5302 SUSON LANE FT. PIERCE, FL 34951				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILCOXSON, ELIZABETH, C 5302 SUSON LANE FT. PIERCE, FL 34951				U00000640148 02/28/07-80055-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information					

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. 772-468-879 SIGNATURE: //uh