PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L80020 1. Corporation Name

WILDERSON INVESTMENT CO., INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90260 047 ***150.00



•						
Principal Place of Business Mailing Address						
% PAUL W. WILDERSON, JR. 355 E. GULF DR.		% PAUL W. WILDERSON, JR. 355 E. GULF DR. SANDEL EL 23967				DO NOT WRITE IN THIS SPACE
SANIBEL FL 33	957	SAMBEL PL 33337	SANIBEL FL 33957			3. Date Incorporated or Qualifed
	•					06/13/1990
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21	*	26				54-7680260 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country 24 25		Zip	Zip Country 29 30			8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Curren		1501			10. Name and Address of New Registered Agent
				81	Name	
WILDERSON, PAUL W., JR. 355 E. GULF DR.				82	Street Addre	ess (P.O. Box Number is Not Acceptable)
	IBEL FL 33957			83		
				_		85 Zip Code
				84	City	FL 85 Zip Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, Fl	authorized orida Stati	ıtes.	tne corporatio	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered ager		E: Registered	Agen	t signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AN	DELETE				Change Addition
NAME .	WILDERSON, PAUL W., JR.		1.2 N/			
STREET ADDRESS	355 E. GULF DR				ADDRESS	
CITY-ST-ZIP	SANIBEL FL			TY-S1	T-ZIP	
TITLE	D	☐ DELETE	2.1 Tf	ΠE		☐ Change ☐ Addition
NAME	WILDERSON, HELEN M.		2.2 N	ME		
STREET ADDRESS			2.3 \$1	REET	ADDRES\$	
CITY-ST-ZIP	SANIBEL FL 2.4C			T-ZIP	[] Ohang [] Addition	
TITLE	•	DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 N			1
STREET ADDRESS					T ADDRESS	
CITY-ST-ZIP TITLE	-	☐ DELETE	4.1 TY		T-ZIP	Change Addition
NAME			4.2N		•	
STREET ADDRESS			400		FADDRE\$\$	
CITY-ST-ZIP				TY-S		
TITLE		☐ DELETÉ	5.1 TI			☐ Change ☐ Addition
NAME			5.2 N	AME		
STREET ADDRESS					F ADDRESS	
CITY-ST-ZIP				TY-S	T-ZIP	
TITLE		☐ DELETE	6.1 TI			☐ Change ☐ Addition
NAME			6.2 N		T ADDDECO	Į.
STREET ADDRESS	i		6.3 S	IKEE	TADDRESS	

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 suppliemental 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 of 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 changes, or on an attacking not with an address, with all other like empowered.

SIGNATURE: 4