FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 MAY 23 AM 10: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M64298** **(6)**

1. Corporate Name

BILLI WILLI'S, INC.

Principal Place of Business

% NORVILLE E. WILSON, JR.
P.O. BOX 1649
DESTIN FL 32540

Mailing Address

% NORVILLE E. WILSON, JR.
P.O. BOX 1649
DESTIN FL 32540

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/07/1988**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

4. FEI Number: **59-2862422** ☐ Applied For ☐ Not Applicable

State, Apt. # or P.O. Box — 22

State, Apt. # or P.O. Box — 27

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

City & State — 23

City & State — 28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip — 24 County — 25

Zip — 29 County — 30

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

9. Name and Address of Current Registered Agent

WILSON, NORVILLE E. JR.
4150 HWY 98 E
DESTIN FL 32541

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the 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. I am familiar with and accept the duties of Section 607.0505, Florida Statutes.

SIGNATURE

(If changing Registered Agent, Registered Agent must sign) (If Registered Agent is a corporation, corporate officer must sign) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 Title	D	01 Title	☐ Change ☐ Addition
02 Name	WILSON, NORVILLE E., JR	02 Name	
03 Street Address	4150 HWY 98 E	03 Street Address	
04 City, St, Zip	DESTIN FL	04 City, St, Zip	
05 Title	D	05 Title	☐ Change ☐ Addition
06 Name	WILSON, CLARE T.	06 Name	
07 Street Address	4150 HWY 98 E	07 Street Address	
08 City, St, Zip	DESTIN FL	08 City, St, Zip	
09 Title	D	09 Title	☐ Change ☐ Addition
10 Name	WILSON, WILLIAM N.	10 Name	
11 Street Address	4150 HWY 98 E	11 Street Address	
12 City, St, Zip	DESTIN FL	12 City, St, Zip	
13 Title		13 Title	☐ Change ☐ Addition
14 Name		14 Name	
15 Street Address		15 Street Address	
16 City, St, Zip		16 City, St, Zip	
17 Title		17 Title	☐ Change ☐ Addition
18 Name		18 Name	
19 Street Address		19 Street Address	
20 City, St, Zip		20 City, St, Zip	
21 Title		21 Title	☐ Change ☐ Addition
22 Name		22 Name	
23 Street Address		23 Street Address	
24 City, St, Zip		24 City, St, Zip	

14. I declare (certify), that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the corporation named in this report or supplemental annual report is in good standing 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.

SIGNATURE: *Norville E Wilson Jr* 5/19/95 904-654-1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

550 '5

D95A48 CP