CC	LE NOW: FILIN PROFIT PRPORATION JUAL REPORT 1996		FLORIDA DEP Sandra	ARTMENT C B. Mortnam tary of State	î STATE			
1. Corporation	JMENT # Non Name WILSON, INC.	/179531	(3)				11 21 1181 8181 8181 1	Biĝis della pilas della secono
	ce of Business ONA BLVD. FL 32725	M	aling Address 829 DELTONA BLYD. DELTONA FL 32725		<u> </u>			
2. Principal P	Place of Business		Mailing Address	-·		3. Date Incorporated or Qualified 05/05/1988	3a. Date of 01/	Last Report 19/1995
21		26	. Ivaling Address			4. FEI Number NOT APPLICABLE		Applied For
Suite, Apt.		27	Suite, Apt. #. etc.	···		5. Certificate of Status Desired		Not Applicable 8.75 Additional Fee Required
City & Stat		28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
4	25 Country 25 9. Name and Address	29	Zip	Countr 30	y		□ No	nder's 199.032,
	J. Hamballa Address	o Current Regist	tereo Agent	81	Name	10. Name and Address of New F	legistered Age	nt
	N, OSCAR W., JR.			82	1	(0.0.0)		
	eltona blvd.			102				
TACH TA	ALA EL DAZAE					ress (P.O. Box Number is Not Acceptab	ie)	
DELTO	NA FL 32725			83		ress in .O. Box Number is Not Acceptab	ie)	
	, 			84	City		8	5 Zip Code
11 Pursuant	to the provisions of Seeling	s 607,0502 and 607	1508, Florida Statutes	84	City		FI 8	1
11. Pursuant t or register familiar wit	to the provisions of Seeling	s 607.0502 and 607 ate of Florida Such ns of, Section 607.0	.1508, Florida Statutes change was authorized 505, Florida Statutes.	84	City	ration submits this statement for the puriod of directors. Thereby accept the appoint	FI 8	1
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SIGNATURE:

oath; that I am an officer or director of the corporation oil the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 inchanged, or on an attachment with an address.

IGNATURE:

SIGNATURE AND TYPEO OR FIRST AND TYPEO OR FIRST OF SIGNING OFFICER OR DIRECTOR

4-11-96 405 574-498