

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 21 AM 9:06

DOCUMENT # M85419 (3)

1. Corporation Name

EILEEN WILEY ENTERPRISES, INC.

Principal Place of Business

% EILEEN WILEY
769 N.E. 75TH ST.
MIAMI FL 33138

Mailing Address

% EILEEN WILEY
769 N.E. 75TH ST.
MIAMI FL 33138

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/10/1988

3a. Date of Last Report
04/21/1994

4. FEI Number
65-0055426

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 Rt. 1, Box 219-15
Suite, Apt. #, etc.

2a. Mailing Address

26 Rt. 1, Box 219-15
Suite, Apt. #, etc.

City & State

23 Micanopy, FL.

City & State

28 Micanopy, FL.

Zip Country
24 32667 USA

Zip Country
29 32667

9. Name and Address of Current Registered Agent

WILEY, EILEEN
769 N.E. 75TH ST.
MIAMI FL 33138

10. Name and Address of New Registered Agent

81 Name Same
82 Street Address (P.O. Box Number is Not Acceptable)
1311 S.E. 149 Place
83 Micanopy
84 City FL 85 Zip Code 32667

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named in Block 9 (registered agent) and the corporation

NOTE: Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
1 WILEY, EILEEN
769 N.E. 75TH ST.
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
2 WILEY, EILEEN
769 N.E. 75TH ST.
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 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:

Eileen Wiley

SIGNATURE AND TYPE D ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/95

Date

904-466-3985

Telephone No.