

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90035 009 ***150.00

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1. Entity Name
WILKINS, FROHLICH, JONES, HEVIA, RUSSELL,
HANAOKA & MIZELL, P.A.



Principal Place of Business
18501 MURDOCK CIRCLE
SIXTH FLOOR
PORT CHARLOTTE, FL 33948

Mailing Address
18501 MURDOCK CIRCLE
SIXTH FLOOR
PORT CHARLOTTE, FL 33948

94030792



2. Principal Place of Business

3. Mailing Address

03112004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0057351

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUSSELL, W KEVIN
18501 MURDOCK CIR
6TH FLOOR
PORT CHARLOTTE, FL 33948

Name

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

City

FL

Zip Code

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME WILKINS, GARY L.
STREET ADDRESS 18501 MURDOCK CIRCLE, 6TH CIR.
CITY-ST-ZIP PORT CHARLOTTE, FL

TITLE P ☐ Delete
NAME FROHLICH, W. CORT
STREET ADDRESS RT. 1, BOX 839
CITY-ST-ZIP PUNTA GORDA, FL

TITLE D ☐ Delete
NAME JONES, PHILLIP J.
STREET ADDRESS 1515 LANCO ST.
CITY-ST-ZIP PT. CHARLOTTE, FL

TITLE D ☒ Delete
NAME SUTTER, BRIAN O
STREET ADDRESS 18501 MURDOCK CIRCLE, 6TH FLOOR
CITY-ST-ZIP PT. CHARLOTTE, FL 33948

TITLE VD ☒ Delete
NAME HEVIA, JESUS
STREET ADDRESS 18501 MURDOCK CIRCLE, 6TH FLOOR
CITY-ST-ZIP PT. CHARLOTTE, FL 33948

TITLE ST ☐ Delete
NAME RUSSELL, W. KEVIN
STREET ADDRESS 25439 RANCAGUA DR.
CITY-ST-ZIP PT. CHARLOTTE, FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME Louise O. Hanaoka
STREET ADDRESS 30337 Holly Rd.
CITY-ST-ZIP PUNTA GORDA, FL 33982

TITLE D ☐ Change ☒ Addition
NAME John B. Mizell
STREET ADDRESS 18501 murdock cir. 6th Floor
CITY-ST-ZIP PORT CHARLOTTE, FL 33948

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gary L. Wilkins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/04
Date

941-625-0700
Daytime Phone #