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NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

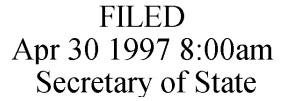
N06769

(6)

WILSON WORLD MAINGATE CONDOMINIUM ASSOCIATION, I NC.

Principal Place of Business

Mailing Address





1629 WINCHESTER RO MEMPHIS TN 38116		1629 WINCHESTER AD MEMPHIS TN 38116-3513								
						3. Date incorporated or Qualified 12/20/1984	3a. Da	04/23/1	Report 1996	
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number Applied Fo			Applied For	
21		26							Vot Applicable	<u>.</u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional				
22		27							Required	4
City & State	9	City & State				6. Election Campaign Financing	г		May Be	
23 Zip	Country	28 Zip	Coi	untry		Trust Fund Contribution	<u> </u>		d to Fees	-
24	25	29	\vdash	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Currer		1001			10. Name and Address of New Registered Agent				┪
·				81 Na	ne			····		7
CORPO	RATION INFORMATION SERVICE	ES. INC.		82 Stre	ot Addr	ess (P.O. Box Number is Not Accepts	ble)			4
	YES STREET	20, 1110	ez Street Add			ess (F.O. BOX NUMBER IS NOT ACCEPTS	ole)			
	ASSEE FL 32301			83						1
•				84 City				AR 76	o Code	\dashv
				City	′		FL	85 Zi	o Code	
office or, re	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was	authorize	d by the	ned corp corporati	oration submits this statement for the ion's board of directors. I hereby acceptant	purpose of the app	changing ointment a	Its registered is registered]
SIGNATURE										1
	Signature, typed or printed name of registered age			d Agent sign	ature require	ed when reinstating)	DATE OF DO. ANIC	NO DECITE	200 111 40	ړ ٰــ
12.	PD OFFICERS AN	ID DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFF	CERS ANE	Change		- }
NAME	WILSON, SPENCE			AME	- 1	* :		C. Cumille		100
	1629 WINCHESTER RD			MANIE ITREET ADDRE		<i>,</i>				6
STREET ADDRESS	MEMPHIS TN				»					ķ
CITY-SI-ZIP TITLE	VD VD	☐ DELETE	2.1 T	TTY-ST-ZIP				Change	Addition	15
NAME	WILSON, ROBERT A		2.2 N							
STREET ADDRESS	1629 WINCHESTER RD			TREET ADORE	ss					1
CITY-ST-ZIP	MEMPHIS TN		1	CITY-ST-ZIP	"					
TITLE	VD	DELETE	3.1 7					Change	Addition	, –
NAME	WILSON, KEMMONS JR		3.2 N	IAME						
STREET ADDRESS	1629 WINCHESTER RD		3.3 S	TREET ADDRE	ss					
CITY-ST-ZIP	MEMPHIS TN		3,4. (CITY-ST-ZIP						
TITLE	D	DELETE	4.1 T	ITLE				Change	Addition	
NAME	Wilson, Kemmons Sr		4, 21	NAME						
STREET ADDRESS	1629 WINCHESTER RD		4.3 S	TREET ADDRE	ss					1
CITY - ST - ZIP	MEMPHIS TN		4.4 0	CITY-ST-ZIP						
TITLE	T	DELETE	5.1 T	ITLE				Change	Addition	1
NAME	PETTEY, JOHN		5.2 N	LAME						
STREET ADDRESS	1629 WINCHESTER RD.		5.3 \$	TREET ADDRE	ss					
CITY-ST-ZIP	MEMPHIS TN			OTY-ST-ZIP			·····			_
TITLE	\$	☐ DELETE	6.1 T		ŀ			Change	Addition	۱
NAME	WALLIN, R. E.			IAME						
STREET ADDRESS	1629 WINCHESTER RD.			STREET ADDRE	SS					
CITY-ST-ZIP	MEMPHIS TN 38116	ad wide abia dilina alaua		ITY-ST-ZIP	m =1-1-	11- Cooling 440 07/0/5 Florida Cont	an I frieds -		at the	4
14. i do heret	by certify that the information supplie	a with this tiling does not qua	min tot tue	exemption	JII Stated	l in Section 119.07(3)(i), Florida Statul	es i julius	r certify th	er tue	.1

accurate and that my signature shall have the same legal effect as if made under o execute this report as required by Chapter 617, Florida Statutes; and that my name