## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N27830

FILED Oct 13, 2009 Secretary of State

Entity Name: WILKES FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1411 MOSSWOOD DRIVE LEESBURG, FL 34748

**Current Mailing Address: New Mailing Address:** 

1411 MOSSWOOD DRIVE LEESBURG, FL 34748 US

FEI Number: 59-2905035 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILKES, GEORGE R 1411 MÓSSWOOD DRIVE LEESBURG, FL 34748

**OFFICERS AND DIRECTORS:** 

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.

SIGNATURE:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition WILKES, GEORGE R. WILKES, GEORGE R. Name: Name: 1003 LEE LANE Address: 1411 MOSSWOOD DRIVE Address:

City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL 34748

Title: VD Title: VD (X) Change ( ) Addition ( ) Delete Name: WILKES, ROBERT E. Name: WILKES, ROBERT E.

Address: 1003 LEE LANE Address: 1003 LEE LANE City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL 34748

Title: STD () Delete Title: () Change () Addition

WILKES, MAUREEN H Name: Name: 1411 MOSSWOOD DRIVE Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: WILKES, BRIAN J Name: WILKES, BRIAN J Address: 1003 LEE LN Address: 1003 LEE LN

City-St-Zip: LEESBURG, FL City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE R.WILKES PD 10/13/2009

Electronic Signature of Signing Officer or Director

Date