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Feb 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N93000005381 (9)

1. Corporation Name

WILDWOOD FOUNDATION, INC.

Principal Place of Business

280 ESTRELLITA DR
FT MYERS BCH FL 33931
US

Mailing Address

PO BOX 2552
FT MYERS BCH FL 33932-2552
US



3. Date Incorporated or Qualified
11/30/1993

3a. Date of Last Report
02/29/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number
16-1449958

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRAUN, KELLY M
800 LAUREL OAK DR.
SUITE 400
NAPLES FL 44963-2738

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME HALL, RICHARD S
STREET ADDRESS 280 ESTRELLITA DR
CITY-ST-ZIP FT MYERS BCH FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 280 ESTRELLITA DR
1.4 CITY-ST-ZIP 33931

TITLE D
NAME HALL, RICHARD S JR
STREET ADDRESS 12 SUFFOLK ST
CITY-ST-ZIP FAIRPORT NY

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 14450

TITLE D
NAME HALL, EVERETT P JR
STREET ADDRESS 26 FOXBORO LANE
CITY-ST-ZIP FAIRPORT NY

3.1 TITLE DIRECTOR
3.2 NAME DENNIS E. DITCH
3.3 STREET ADDRESS COUNTY ROAD #40
3.4 CITY-ST-ZIP BLOOMFIELD NY.

TITLE D
NAME FOX, P R
STREET ADDRESS 135 CORPORATE WOODS, SUITE 300
CITY-ST-ZIP ROCHESTER NY 14623

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

TITLE S
NAME MIRABELLA, JANICE I
STREET ADDRESS 280 ESTRELLITA DR
CITY-ST-ZIP FT MYERS BCH FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP 33931

TITLE D
NAME HALL, WILLIAM H.
STREET ADDRESS 12 SUFFOLK ST
CITY-ST-ZIP FAIRPORT NY

6.1 TITLE
6.2 NAME HALL, WILLIAM R.
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP 14450

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard S. Hall
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/97 941-463-2130
Date Daytime Phone # 0067227

CR2E037 (9/96)