

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90098 034 ****61.25

DOCUMENT # N93000005381

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
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

11/30/1993

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

9. Name and Address of Current Registered Agent

BRAUN, KELLY M
800 LAUREL OAK DR
SUITE 400
NAPLES FL 34103-2738

10. Name and Address of New Registered Agent

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

TITLE D ☐ DELETE
NAME HALL, RICHARD S
STREET ADDRESS 280 ESTRELLITA DR
CITY-ST-ZIP FT MYERS BCH FL 33931

TITLE D ☐ DELETE
NAME HALL, RICHARD S JR
STREET ADDRESS 12 SUFFOLK ST
CITY-ST-ZIP FAIRPORT NY 14450

TITLE D ☐ DELETE
NAME DITCH, DENNIS E
STREET ADDRESS COUNTY RD #40
CITY-ST-ZIP BLOOMFIELD NY

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

TITLE S ☐ DELETE
NAME MIRABELLA, JANICE I
STREET ADDRESS 280 ESTRELLITA DR
CITY-ST-ZIP FT MYERS BCH FL 33931

TITLE D ☐ DELETE
NAME HALL, WILLIAM R
STREET ADDRESS 12 SUFFOLK ST
CITY-ST-ZIP FAIRPORT NY 14450

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 D ☒ Change ☐ Addition
2.2 NAME RICHARD S. HALL JR
2.3 STREET ADDRESS 280 ESTRELLITA DR
2.4 CITY-ST-ZIP FT MYERS BEACH FL 33931

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 D ☒ Change ☐ Addition
6.2 NAME WILLIAM R HALL
6.3 STREET ADDRESS 5590 HIDDEN HARBOR TRAIL
6.4 CITY-ST-ZIP GAINESVILLE GA 30504

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/99 720-503-4612

CR2E037-11/98