

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000080536

1. Entity Name
WIL- DESIGN, INC.

Principal Place of Business Mailing Address
4191 SAN JUAN AVENUE 4191 SAN JUAN AVENUE
JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32210

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

LAUTECH, P.A.
118 WEST ADAMS STREET SUITE 500
JACKSONVILLE, FL 32202

4. FEI Number 59-3667797 Applied For Not Applicable

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

7. Name and Address of New Registered Agent

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing, Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME PRESIDENT
STREET ADDRESS BAYAN D. WILSON
CITY-ST-ZIP 4191 SAN JUAN AVENUE
JACKSONVILLE, FL 32210 ☐ Delete

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 900004625369
CITY-ST-ZIP -10/05/01--01073--005
****150.00 ****150.00

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

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

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

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bayan D. Wilson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-16-2001
Date

Daytime Phone #

FILED

01 OCT -1 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)



✓ Income Tax Service
✓ Financial & Insurance Services
✓ Accounting & Bookkeeping Services

208

320 Osceola Avenue
Jacksonville Beach, FL 32250
Phone 904/241-2533
Fax: 904/241-1604
www.triplechecktax.com

August 15, 2001

Division of Corporations
Annual Reports Filing
Post Office Box 6327
Tallahassee, FL 32314

Re: Profit Corporation Annual Report
Document P00000080536 – Wil-Design, Inc.

Dear Sir/Madam,

I met with Bryan Wilson, president of the above shown corporation. After reviewing his packet of mailings, we determined he had not received his 2001 Uniform Business Report. For whatever reason, most likely because he is a first year corporation, he had not received the original first notice.

I prepare all of Mr. Wilson's monthly, quarterly and annual tax reports. Mr. Wilson has been diligent about providing me all government paperwork.

Please accept the enclosed Annual Report with full payment. I am hopeful that you will abate the late filing penalties based on the statements contained herein as satisfying reasonable cause criteria.

Thank you for your consideration in this matter. Please do not hesitate to contact me if you have any questions or concerns regarding this issue.

Sincerely,

Jeffrey S. McBride
Associate

Enclosures:
Annual Report
Check #285711562