

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90472 046 ***550.00

DOCUMENT # P02000008879

1. Entity Name

BEAU WILT, INC.



Principal Place of Business

5900 IMPERIAL LAKES BLVD
MULBERRY FL 33860

Mailing Address

5900 IMPERIAL LAKES BLVD
MULBERRY FL 33860

J4000000



MOORE

CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
02-0591589

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE FL 32301-0000

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME WILT, BEAU
STREET ADDRESS 5090 WILLIAMSTOWN BLVD
CITY-ST-ZIP LAKELAND FL 33810

TITLE VSD ☐ Delete
NAME WILT, SUSAN
STREET ADDRESS 5090 WILLIAMSTOWN BLVD
CITY-ST-ZIP LAKELAND FL 33810

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Wilt, Beau
STREET ADDRESS 1720 Tierra Alta Dr
CITY-ST-ZIP Lakeland, FL 33813

TITLE VSD ☒ Change ☐ Addition
NAME Wilt, Susan
STREET ADDRESS 1720 Tierra Alta Dr.
CITY-ST-ZIP Lakeland, FL 33813

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Beau Wilt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/04

Date

863-646-7979

Daytime Phone #