

2004 FOR PROFIT CORPORATION ANNUAL REPORT

4/30/2004-90378-015-\$150.00-\$150.00

DOCUMENT # P03000115461

1. Entity Name
RANDY WILSON ENTERPRISE, INC.



FILED
04 JUN 10 AM 9:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1117 MORGAN ROAD
PORT ORANGE, FL 32127 US

Mailing Address
1117 MORGAN ROAD
PORT ORANGE, FL 32127 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03162004

Chg-P

CR2E034 (10/03)

4. EEI Number

20-0303906

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILSON, RANDY L
1117 MORGAN ROAD
PORT ORANGE, FL 32127

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 filer if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
P
WILSON, RANDY L
1117 MORGAN ROAD
PORT ORANGE, FL 32127 ☐ Delete

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

TITLE
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VP
WILSON, RANDY L
1117 MORGAN ROAD
PORT ORANGE, FL 32127 ☐ Delete

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☐ Delete

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CITY-STATE-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Randy Wilson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/04

Date

Daytime Phone #

TR