

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032848

Entity Name: WMJ TRIO, INC.

FILED  
Mar 07, 2009  
Secretary of State

## Current Principal Place of Business:

6817 SOUTHPOINT PARKWAY  
SUITE 1202  
JACKSONVILLE, FL 32216 US

## Current Mailing Address:

6817 SOUTHPOINT PARKWAY  
SUITE 1202  
JACKSONVILLE, FL 32216 US

## New Principal Place of Business:

4190 BELFORT ROAD  
SUITE 315  
JACKSONVILLE, FL 32216 US

## New Mailing Address:

4190 BELFORT ROAD  
SUITE 315  
JACKSONVILLE, FL 32216 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILCOX, ROBERT  
6817 SOUTHPOINT PARKWAY  
SUITE 1202  
JACKSONVILLE, FL 32216 US

## Name and Address of New Registered Agent:

WILCOX, ROBERT  
4190 BELFORT ROAD  
SUITE 315  
JACKSONVILLE, FL 32216 US

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: ROBERT WILCOX

03/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: WILCOX, ROBERT D  
Address: 6817 SOUTHPOINT PKWY., SUITE 1202  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: DVP ( ) Delete  
Name: PHILLIPS, MARK B  
Address: 7979 MOUNT RANIER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: DST ( ) Delete  
Name: WHALEY, WALKER  
Address: 13673 LONGS LANDING ROAD W.  
City-St-Zip: JACKSONVILLE, FL 32225 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT WILCOX

P

03/07/2009

Electronic Signature of Signing Officer or Director

Date