

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P13438** (7)  
1. Corporation Name  
**G.A. WILICH CO.**

Principal Place of Business  
**420 US HWY ONE  
NORTH PALM BEACH FL 33408**

Mailing Address  
**420 US HWY ONE  
NORTH PALM BEACH FL 33408**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>03/03/1987</b>	
21 Suite, Apt #, etc.	26 Suite, Apt #, etc.	4. FEI Number <b>06-0911732</b>		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
24 Country	29 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>FHS CORPORATE SERVICES, INC. 11780 U.S. HIGHWAY ONE, SUITE #300 NORTH PALM BEACH FL 33408</b>		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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILICH, GEORGE A.		1.2 NAME		
STREET ADDRESS	420 U.S. HWY 1		1.3 STREET ADDRESS		
CITY- ST- ZIP	N. PALM BEACH FL		1.4 CITY- ST- ZIP		
TITLE	VSD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILICH, LINDA B.		2.2 NAME		
STREET ADDRESS	420 U.S. HWY 1		2.3 STREET ADDRESS		
CITY- ST- ZIP	N. PALM BEACH FL		2.4 CITY- ST- ZIP		
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LUCEY, GORDON		3.2 NAME		
STREET ADDRESS	1177 SUMMER STREET		3.3 STREET ADDRESS		
CITY- ST- ZIP	STAMFORD, CONNECTICUT		3.4 CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY- ST- ZIP			4.4 CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY- ST- ZIP			5.4 CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY- ST- ZIP			6.4 CITY- ST- ZIP		

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 exercise this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on any attachment with any additions.

SIGNATURE:  4-24-98 561-842-3131

CR2E034 (10/97)