

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23928

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** G.L. WILSON BUILDING COMPANY

**Current Principal Place of Business:**

190 WILSON PARK ROAD  
STATESVILLE, NC 28625 US

**New Principal Place of Business:**

**Current Mailing Address:**

190 WILSON PARK ROAD  
STATESVILLE, NC 28625 US

**New Mailing Address:**

**FEI Number:** 56-0473455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WILSON, THOMAS L.  
Address: 190 WILSON PARK RD.  
City-St-Zip: STATESVILLE, NC 28625 US

Title: TD  
Name: NICHOLSON, MEREDITH M.  
Address: 110 STROUD ROAD  
City-St-Zip: STATESVILLE, NC 28625 US

Title: S  
Name: JOHNSON, MARGARET W.  
Address: 5071 NC HWY 16 N  
City-St-Zip: TAYLORSVILLE, NC 28681 US

Title: VD  
Name: WILSON, JAMES D.  
Address: 3233 BROADMOOR DRIVE  
City-St-Zip: STATESVILLE, NC 28625 US

I hereby 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 all other like empowered.

SIGNATURE: MARGARET W. JOHNSON

SEC.

01/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date