

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000053360 (2)**
1. Corporation Name
**ROBERT G. WILKERSON, INC.
WILKINSON**

Principal Place of Business Mailing Address
**4321 ROBERT KING ROAD
MIDDLEBURG FL 32068** **4321 ROBERT KING ROAD
MIDDLEBURG FL 32068**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 **5044 County Rd 218** 26 **P. O. Box 133**
22 Subt. Apt. #, etc 27 Subt. Apt. #, etc
23 **Middleburg, FL** 28 **Middleburg, FL**
24 **32068** 25 Country 29 **32050** 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
07/27/1983 **02/21/1994**

4. FEI Number Applied For
59-3197095 Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under § 185.032,
Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**WILKINSON
-WILKERSON, ROBERT G
4321 ROBERT KING ROAD
MIDDLEBURG FL 32068** *Spelling correction*

10. Name and Address of New Registered Agent
B1 Name **Robert G. Wilkinson** *Address change only*
B2 Street Address (P.O. Box Number is Not Acceptable)
5044 County Road 218
B3
B4 City **Middleburg** B5 Zip Code **FL 32068**

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 officer 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 _____ DATE _____
(Signature typed or printed name of registered agent and Florida resident) (Signature typed or printed name of registered agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD WILKINSON	1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILKERSON, ROBERT G	2. NAME	
STREET ADDRESS	4321 ROBERT KING ROAD	3. STREET ADDRESS	5044 County Road 218
CITY, ST, ZIP	MIDDLEBURG FL 32068	4. CITY, ST, ZIP	Middleburg, FL 32068
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		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		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		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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(6)(b), 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 conduct this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert G. Wilkinson* **Robert G. Wilkinson President** *904 282-6339*
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Date (Typed Name)