

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

APPROVED  
AND  
FILED

1997 MAY -1 PM 1:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *9406007642*

1. Corporation Name

*Wilson Green Development, Inc.*

Principal Place of Business

Mailing Address

*1002 Gardenia Dr*

*1002 Gardenia Dr.*

*Tallahassee, Fla. 32312-3004*

3. Date Incorporated or Qualified

*3-7-94*

3a. Date of Last Report

*4-29-96*

2. Principal Place of Business

2a. Mailing Address

21 *1002 Gardenia Dr*

26 *Tallahassee Fla*

4. FEI Number

*59 32 388 00*

Applied For

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 s. 199.032,  
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

*Wilson, Dorothy C.*

*1002 Gardenia Dr.*

*Tallahassee Fla 32312-3004*

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 and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Note: Type or printed name of registered agent and the if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

*P William Hiram Wilson*  
*1002 Gardenia Dr*  
*Tallahassee, FL 32312-3004*

☐ DELETE

*VP Dorothy C Wilson*  
*1002 Gardenia Dr.*  
*Tallahassee, Fla. 32312*

☐ DELETE

*W William Hiram Wilson,*  
*1002 Gardenia Dr*  
*Tallahassee Fla 32312*

☐ DELETE

*ST Mary Margaret Wilson Lee*  
*40 1002 Gardenia Dr.*  
*Tallahassee, FL. 32312*

☐ DELETE

*NAME*  
*STREET ADDRESS*  
*CITY-ST-ZIP*

☐ DELETE

*NAME*  
*STREET ADDRESS*  
*CITY-ST-ZIP*

☐ DELETE

14. I do 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 execute 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:

*Dorothy C Wilson*

*DOROTHY C. Wilson*

*4-30-97 904-325-1476*

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)