FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAR -6 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000047978 (9)**

1. Corporation Name
WILSON BELLI, INC.

Principal Place of Business	Mailing Address
401-A S. INDIAN RIVER DR. FORT PIERCE FL 34950	401-A S. INDIAN RIVER DR. FORT PIERCE FL 34950

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/21/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 3218 S. LAKEVIEW CIR.	26 WILSON BELLI, INC
Suite, Apt. #, etc. 22 APT. 101	Suite, Apt. #, etc. 27 P.O. BOX 3526
City & State 23 FT. PIERCE, FL.	City & State 28 FT PIERCE FL.
Zip 24 34949 Country 25 USA ST. LUCIE	Zip 29 34948-3526 Country 30 USA

4. FEI Number: 65-0502375 ☐ 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
FEE, FRANK H III 401-A SOUTH INDIAN RIVER DR. FORT PIERCE FL 34950	81 Name: KENNETH V. WILSON 82 Street Address (P.O. Box Number is Not Acceptable): 3218 S. LAKEVIEW CIRCLE 83: APT. 101 84 City: FT. PIERCE FL 85 Zip Code: 34949

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: Kenneth V Wilson KENNETH V. WILSON 15 FEB 95
(Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	C/V/T ☑ Change ☐ Addition
NAME	WILSON, KENNETH V	1.2 NAME	WILSON, KENNETH V
STREET ADDRESS	3218 LAKEVIEW CIR., APT. 101	1.3 STREET ADDRESS	3218 S. LAKEVIEW CIR, APT 101
CITY-ST-ZIP	FT PIERCE FL 34949	1.4 CITY-ST-ZIP	FT. PIERCE FL 34949
TITLE	D	2.1 TITLE	P/D ☑ Change ☐ Addition
NAME	WILSON, HELEN B	2.2 NAME	WILSON HELEN B
STREET ADDRESS	3218 LAKEVIEW CIR., APT. 101	2.3 STREET ADDRESS	3218 S LAKEVIEW CIR APT 101
CITY-ST-ZIP	FT PIERCE FL 34949	2.4 CITY-ST-ZIP	FT PIERCE FL 34949
TITLE	D	3.1 TITLE	S/D ☑ Change ☐ Addition
NAME	WILSON, MERCEDES M	3.2 NAME	WILSON MERCEDES M
STREET ADDRESS	3218 LAKEVIEW CIR., APT. 101	3.3 STREET ADDRESS	3218 S LAKEVIEW CIR APT 101
CITY-ST-ZIP	FT PIERCE FL 34949	3.4 CITY-ST-ZIP	FT PIERCE FL 34949
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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 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: Kenneth V Wilson 15 FEB 95 (407) 489-2744
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
KENNETH V. WILSON

0376431 CP