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FILED

Feb 17 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000000152 (5)

1. Corporation Name

ERIC-MICHEL, INCORPORATED

Principal Place of Business

120 INTL PKWY  
SUITE 124  
LAKE MARY FL 32746  
US

Mailing Address

150 ESTATES CIRCLE  
LAKE MARY FL 32746-3045



2. Principal Place of Business

21 120 INTL PKWY

Suite, Apt. #, etc.

22 Suite 128

City & State

23 Heathrow FL

Zip

24 32746

Country

25 Seminole

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

12/30/1994

3a. Date of Last Report

04/16/1996

4. FEI Number

59-3292835

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

HUGHES, JOHN W  
4966 SHORELINE CIRCLE  
SANFORD FL 32771

10. Name and Address of New Registered Agent

81 Name SUZANNE M WIGGINS

82 Street Address (P.O. Box Number is Not Acceptable)

150 ESTATES CIRCLE

83

84 City

LAKE MARY

FL

85

Zip Code

32746

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

Suzanne M. Wiggins SUZANNE M. Wiggins President.

1/21/97

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME VILLALARD, ERIC M  
STREET ADDRESS 1134 POINT NEWPORT TERRACE, #212  
CITY-ST-ZIP CASSELBERRY FL 32707

TITLE D ☐ DELETE  
NAME WIGGINS, SUZANNE M  
STREET ADDRESS 150 ESTATES CIRCLE  
CITY-ST-ZIP LAKE MARY FL 32746

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P.I.D ☒ Change ☐ Addition  
1.2 NAME WIGGINS, SUZANNE M.  
1.3 STREET ADDRESS 150 ESTATES CIRCLE  
1.4 CITY-ST-ZIP LAKE MARY FL 32746

2.1 TITLE V.I.M.D ☐ Change ☒ Addition  
2.2 NAME WIGGINS, DAVID C.  
2.3 STREET ADDRESS 150 ESTATES CIRCLE  
2.4 CITY-ST-ZIP LAKE MARY FL 32746

3.1 TITLE C.I.T.S.D ☐ Change ☒ Addition  
3.2 NAME WIGGINS, JACK L. JR.  
3.3 STREET ADDRESS 332 N. 84TH ST.  
3.4 CITY-ST-ZIP SEATTLE WA 98103

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

Suzanne M. Wiggins SUZANNE M. Wiggins 2-8-97 407.353.3571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)