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

Mailing Address

PROFIT CORPORATION
ANNUAL REPORT

1997

appears in Block 12 or Block 1

SIGNATURE:

Principal Place of Business



FLORIDA DEPARTMENTOT STATE

Sandra B. Mortnam

FILED

Feb 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080159 (2)

CARL WILBER AND CO., INC.

11620 COLUMBIA PARK DRIVE EAST JACKSONVILLE FL 32258		P.O. BOX 41285 JACKSONVILLE FL 3	P.O. BOX 41285 JACKSONVILLE FL 32203-1285						
						3. Date Incorporated or Qualified 08/23/1996	3a. D	ate of Last R	eport
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	~		plied For
21		26		·····		59-340206	<u> </u>		t Applicable
Suite, Apt #, etc.		27				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζιρ 24	Country 25	Zip 29	29 30			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Cu	irrent Registered Agent			Y	10. Name and Address of New Re	istered	Agent	
WILBER, CARL				81 Name					
11620 COLUMBIA PARK DRIVE EAST JACKSONVILLE FL 32258				82	Street Addr	ddress (P.O. Box Number is Not Acceptable)			
	*			83					
				84	City		FL	85 Zip	Code
office or re agent. Lar SIGNATURE	o the provisions of Sections 607 gistered agent, or both, in the to a familiar with, and accept the of Standard or professions of registers.	State of Florida. Such change obligations of, Section 607.050	was authorize 15, Florida Stal	d by tutes	y the corporat s.	oration submits this statement for the pion's board of directors. I hereby acceptions when reinstalling	urpose of the app	of changing if pointment as	s registered registered
12.		S AND DIRECTORS	13.		ant agrand to requi	ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	S IN 12
TITLE	D	DELET		TLE	·····			Change	Addition
NAME .	WILBER, CARL		1.2 N	AME				_	
STREET ADDRESS	11620 COLUMBIA PARK I	DRIVE EAST	1.3 \$	REET	ADORESS				
CITY - S1 - ZIP	JACKSONVILLE FL 32258	1	1.4 C	ITY-S	ST-ZIP				
TITLE		DELET						Change	Addition
NAM:			22 N	AME	1				
STREET ADDRESS			235	TREET	ADDRESS				
CHY-SI-ZiP			2.40	жү-:	ST-ZIP				<u> </u>
TITLE		DELETI	E 3.1 TI	TLE				Change	Addition
NAME			32 N	AME					
STREET ADDRESS			3 3 S	TREET	ADDRESS				
CITY - ST - ZIF		T DELET			ST-ZIP			0	T Large
TIFLE		☐ DELET	1					L Change	☐ Addition
NAME			4.21						
STREET ADDRESS					I ADDRESS				
CITY-ST-ZIP		Driet			ST - ZIP			Change	Addition
THEE		☐ DELETI			ļ			L Change	Addition
NAME:			5.2 N						
STREET ADDRESS					TADDRESS				
CITY-SI-ZIF		DELET		•••••	ST-ZIP			Change	Addition
TITLE		L_J OELET						LJ CHANGE	OUGICION
NAME.			6.2 N						
STREET ADDRESS			6.3 S	HEE	T ADDRESS				

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

CHE WILLER