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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1998 8:00am

Secretary of State

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GU1-997-1441

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000093545 (7)

WILKERSON, BURKETT & ASSOCIATES, INC.

Principal Place of Business Mailing Address						
					1	
2502 DEL PRADO BLVD. S. CAPE CORAL FL 33904		2502 DEL PRADO BLVD. S. CAPE CORAL FL 33904				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
9 Principal P	Place of Business	2a, Mailing Address				11/12/1996 4. FEt Number LApplied For
21		26				7,7,5,100,101
Suite, Apt. #, etc.		Suite, Apt. #, etc.				65-0705518 Not Applicable \$8,75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ıntry	,	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🕍 Yes 🗌 No
	g, Name and Address of Currer	il Registered Agent				10. Name and Address of New Registered Agent
	RKETT, WAYNE D			81	Name	me
2502 DEL PRADO BLVD. S.				82	Stree	eet Address (P.O. Box Number is Not Acceptable)
CA	PE CORAL FL 33904				<u> </u>	
				83	1	
				84	City	y 85 Zip Code
44 Purement	to the provisions of Sections 607 050	12 and 607 1509. Florida Stat	don the el	0040	name	ned corporation submits this statement for the purpose of changing its registered
Onice or i	egistered agent, or both, in the State	i or monda. Such change was	s autnorize	o by	/ the co	corporation's admits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
=	m familiar with, and accept the obligation	ations of, Section 607.0505, I	riorida Stat	ules	> ,	
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable (N'	DIE Rapistare	d Ager	ent signate	alure required when reinstatug) DATE
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TI	TLE		Change Addition
NAME	Burkett , wayne D		1.2 N/	ME		
STREET ADDRESS	2817 SW 31ST LANE		1.3 \$1	REET	ADDRESS	ss
CITY-ST-ZIP	CAPE CORAL FL 33914		1.4 CI	TY-SI	T-7iP	
TITLE	0	☐ DELETE	2.1 TO	TLE		Change Addition
NAME	BURKETT, LEOTA R		2.2 NA	ME		
STREET ADDRESS	2817 SW 31ST LANE		2.3 ST	REET	ADDRESS	SS
CITY-ST-ZIP	CAPE CORAL FL 33914	- Deleve	2. 4 C		T-ZIP	
TITLE		☐ DELETE	3.1 717			Change Addition
NAME			3.2 NA			
STREET ADDRESS					ADDRESS	SS
CITY-ST-ZIP TITLE		DELETE	3.4. CI		T-ZIP	
NAME		☐ Official	4.1 111			Change Addition
STREET ADDRESS			4.2 N		*DDDCCO	
CITY-ST-ZIP					ADDRESS	35
TITLE		☐ DELETE	4.4 C() 5.1 T()		- ZIP	· Change Addition
NAME			5.2 NA			Change Addition
STREET ADDRESS					ADDRESS	ss
CITY-ST-ZIP			5.4 CIT			~
TITLE		DELETE	6.1 TIT		E41	Change Addition
NAME			6.2 NA			
STREET ADDRESS					ADDRESS	ss
CITY-ST-ZIP			6.4 CIT	Y-ST-	- ZIP	
14. I hereby or	ertify that the information supplied wi	th this filing does not qualify	for the exe	moti	ion stat	tated 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 13 if chapter 607 or on an attachment with an address.						