

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

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000022328 (3)**

1. Corporation Name

WILSON QUALITY PROPERTIES, INC.



Principal Place of Business

Mailing Address

**114 NE 1ST ST
P O BOX 308
TRENTON FL 32693**

**114 NE 1ST ST
P O BOX 308
TRENTON FL 32693**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 1208 E Wade St.

Suite, Apt. #, etc.

22 P.O. Box 428

City & State

23 Trenton, FL

Zip

24 32693

Country

25 Gilchrist

2a. Mailing Address

26 P.O. Box 428

Suite, Apt. #, etc.

27 1208 E Wade St.

City & State

28 Trenton, FL

Zip

29 32693

Country

30 Gilchrist

3. Date Incorporated or Qualified

03/06/1997

4. FEI Number

59-3432675

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**THEODORE M. BURT, P.A.
114 NE 1ST ST
TRENTON FL 32693**

10. Name and Address of New Registered Agent

81 Name

Chaille Wilson

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

1208 E Wade St.

83

84 City

Trenton

FL

85 Zip Code

32693

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

Chaille Wilson

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

(NOTE: Registered Agent signature required when reinstating)

4-20-98

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	WILSON, MARC	
STREET ADDRESS	1208 E WADE ST	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WILSON, CHAILLE	
STREET ADDRESS	1208 E WADE ST	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WILSON, MURRAY	
STREET ADDRESS	1208 E WADE ST	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE	D	<input type="checkbox"/> DELETE
NAME	WILSON, CYNTHIA	
STREET ADDRESS	1208 E WADE ST	
CITY-ST-ZIP	TRENTON FL 32693	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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.

CR2E034 (10/97)