

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 23, 2001 8:00 am
Secretary of State

05-23-2001 91187 006 ***150.00

DOCUMENT # **097000026025**

1. Entity Name

WLD H Productions Inc

Principal Place of Business

Mailing Address

**4871 Glover LN
Milton FL 32570**

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Milton FL 32570**

2. Principal Place of Business

4871 Glover LN

3. Mailing Address

4871 Glover LN

State, Apt. #, etc.

State, Apt. #, etc.

City & State

Milton FL

City & State

Milton FL

Zip

County

Zip

County

32570

32570

6. Name and Address of Current Registered Agent

**William Peacock
11555 Dueling Oaks Ct
Pensacola FL 32514**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

William Peacock

William L. Peacock

5-8-01

Signature Required for Principal Officer or Registered Agent and for each Director

Signature Required for each Registered Agent or Director

Date

9. This corporation is eligible to elect to be a Subchapter S corporation. (See criteria on back)

FILE FEE: \$150.00

AFTER MAY 1, 2001 Fee will be \$550.00

Make Check payable to Department of State

10. Check on Campaign Financing (net fund contribution)

\$5.00 May 13 Added to Fees

11. OFFICERS AND DIRECTORS

**William VPT/D
8023 Glenview Rd
Milton FL 32583**

**AS/D
William Peacock
11555 Dueling Oaks Ct
Pensacola FL 32514**

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William Peacock
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Pensacola FL 32514**

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12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If 11)

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

☐ Change ☐ Add

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(g), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12.

SIGNATURE:

William Peacock

William L. Peacock

5-8-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Line #