

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91351 033 ***150.00

DOCUMENT # P97000064917

1. Entity Name

WHEELER INVESTMENT GROUP, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1572 LINKSIDE DRIVE

Suite, Apt. #, etc.

3. Mailing Address

1572 LINKSIDE DRIVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORANGE PARK FLCity & State
ORANGE PARK FL4. FEI Number
65-0774031Applied For
Not ApplicableZip
32073Country
USAZip
32073Country
USA5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

WILLIAM GAUSE

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

1572 LINKSIDE DRIVE

City

ORANGE PARK

FL

Zip Code

32073

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 G. Gause

WILLIAM GAUSE, VICE PRESIDENT

4-30-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DIRECTOR
NAME WHEELER, PATSY C
STREET ADDRESS 18 ST. THOMAS DRIVE
CITY - ST - ZIP PALM BEACH GARDENS FL 33418

TITLE VICE PRESIDENT
NAME GAUSE, WILLIAM
STREET ADDRESS 1572 LINKSIDE DRIVE
CITY - ST - ZIP ORANGE PARK FL 32073

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13. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

William G. Gause

WILLIAM GAUSE

4-30-02

904-259-4863
(904) 264-0377

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)