

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000089622

FILED  
Jan 30, 2009  
Secretary of State

Entity Name: WILSON SPRINGS, INC.

## Current Principal Place of Business:

321 N. MARION AVE  
LAKE CITY, FL 32055

## New Principal Place of Business:

## Current Mailing Address:

321 N. MARION AVE  
LAKE CITY, FL 32055

## New Mailing Address:

FEI Number: 59-3482786      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, HUGH A  
321 N. MARION AVE  
LAKE CITY, FL 32055      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: TYE, PATTIE D  
Address: 1901 SPANN ST  
City-St-Zip: HOUSTON, TX 77019

Title: S      ( ) Delete  
Name: WEBER, PENNY W  
Address: 361 30TH P[L  
City-St-Zip: GAINESVILLE, FL 32605

Title: D      ( ) Delete  
Name: LOWERY, SUSON  
Address: 2301 PARGOUD BLVD.  
City-St-Zip: MONROE, LA 71201

Title: VPT      ( ) Delete  
Name: LOWERY, JAMES  
Address: 2301 PARGOUD BLVD  
City-St-Zip: MONROE, LA 71201

Title: D      ( ) Delete  
Name: WILSON, MARK W  
Address: 4301 TRADEWINDS DR  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P      ( ) Delete  
Name: WILSON, HUGH A  
Address: 321 N. MARION AVE  
City-St-Zip: LAKE CITY, FL 32055

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      (X) Change ( ) Addition  
Name: LOWERY, SUSAN  
Address: 2301 PARGOUD BLVD.  
City-St-Zip: MONROE, LA 71201

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUGH A. WILSON

Electronic Signature of Signing Officer or Director

PRES

01/30/2009

Date