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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000097769 (8) DOCUMENT #

WILDE LAKE INVESTORS, INC.

FILED May 11 1998 8:00am Secretary of State

| Principal Place of Business Mailing Address | | | | | | | | | FB 10 10 11 100 100 100 | 110 1011 | E 1811 1881 | |
|---|--|---|----------------------------|---|------------------------------------|--|---------------------------------------|--|---------------------------------|----------|--------------|--|
| \$291 WILDE LAKE BOULEVARD 3291 WILDE LAKE BOUL | | | | | | | | | | | | |
| PENSACOLA FL 32526 | | | | PENSACOLA FL 32526 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | | | 3. Date Incorporated or Qualified | I INIS SPACE | | | |
| | | | | | | | | 11/17/1997 | | | | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | 4. FEI Number | | ΙΔn | plied For | |
| 21 | | | | 26 | | | | 59-3483585 | - | + - | t Applicable | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | eo. | | dditional | |
| 22 | | | | 27 | | | | 5. Certificate of Status Desired | | | quired | |
| City & State | | | | City & State | | | | 6. Election Campaign Financing | \$5 | .00 | May Be | |
| 23 | | | | 26 | | | | Trust Fund Contribution Added to Fees | | | | |
| Zip | Country | | | Zip 1 | · — · | | | 8. This corporation owes or has paid the current year intangible | | | | |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | | | 30 | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent | | | | | | |
| EH | LIOTT, JOS | | Tell (10g) | stered Agent | | 81 | Name | ID. Hame and Address Of New Regis | siered Agent | | | |
| | | LAKE BOULEVARD | | | | | | | | | | |
| PENSACOLA FL 32526 | | | | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) |) | | | |
| | | 1 5 05050 | | | | 83 | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | 84 | City | | FL 85 | Zip (| Code | |
| 11. Pursuant | to the provis | sions of Sections 607.0 | 0502 and | 607.1508, Florida | Statutes, the al | DOV | I e-named corpo | oration submits this statement for the purp | pose of changi | no its | registered | |
| office or r | registered ag ım familiar w | gent, or both, in the St rith, and accept the ob | ate of Flor digations o | rida. Such change of, Section 607.05 | was authorized 05. Florida Stat | d by ute: | y the corporations. | on's board of directors. I hereby accept t | he appointmer | nt as | registered | |
| SIGNATURE | | | | | | | - | | | | Ī | |
| Signature: typed or printed name of registured agent and title if applicable (NOTE: F | | | | | | | ent signature require | d when reinstating) | DATE | | | |
| 12. | D | OFFICERS | AND DIRE | | 13. | | · · · · · · · · · · · · · · · · · · · | ADDITIONS/CHANGES TO OFFICER | | | | |
| TITLE | | T INCEDIA | | ☐ DELET | | | | | ☐ Cha | nge | Addition | |
| NAME ELLIOTT, JOSEPH STREET ADDRESS 3291 WILDE LAKE BOULEVAN | | | | Ph 12 | | | | | | | | |
| DENICACOLA EL AGRAG | | | | ·~ | | | ADDRESS | | | | | |
| CITY-ST-ZIP TITLE | 1 6110711 | JOGN 1 E 02020 | · | ☐ DELET | | | ST-ZIP | | ☐ Cha | naa | Addition | |
| NAME | | | | | | 2.1 TITLE 2.2 NAME | | | L_ Cita | nge | L_ AQUIIIOII | |
| STREET ADDRESS | | | | | | 2.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | | | ST-ZIP | | | | | |
| TITLE | | | | DELET | | | 31-24 | | ☐ Cha | nae | Addition | |
| NAME | | | | _ | 3.2 NA | | | | | •- | | |
| STREET ADDRESS | | | | | | | ADDRESS | | | | ŀ | |
| CITY-ST-ZIP | | | | | | | ST-ZIP | | | | | |
| TITLE | | | | ☐ DELET | | | | | ☐ Cha | nge | Addition | |
| NAME | | | | | 4. 2 N | AME | | | | | | |
| STREET ADDRESS | | | | | 4.3 ST | REET | ADDRESS | | | | | |
| CITY-ST-ZIP | | _ | | | 4.4 CI | IY-S | IT-ZIP | | | | | |
| TITLE | | | | DELET | E 5.1 TH | LE | | | ☐ Cha | nge | Addition | |
| NAME | | | | | 5.2 NA | ME | | | | | | |
| STREET ADDRESS | | | | | 5.3 ST | REET | ADDRESS | | | | | |
| CITY-ST-ZIP | · | | | | 5.4 CI | | T-ZIP | | | | | |
| TITLE | | | | ☐ DELET | 1 | | | | Chai | nge | ☐ Addition | |
| NAME | | | | | 62 NA | | | | | | | |
| STREET ADDRESS | | | | | | | ADDRESS | | | | | |
| CITY-ST-ZWP | | | | | 6.4 CI | Y-S | IT-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 eath; 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.

11-30-98