

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
T DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000058450 ✓  
ation Name

THOUSE ENTERPRISES INC.

Place of Business

VER OAK DRIVE  
VILLE FL 32223

Mailing Address

12983 SILVER OAK DRIVE  
JACKSONVILLE FL 32223

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/29/1998

4. FEI Number

59-3520237

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75

Fee

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00

May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

Yes

No

Place of Business

8 LAKE MANDARIN

Apt. #, etc.

CIRCLE, EAST

State

JACKSONVILLE, FL

Zip

32223

Country

USA

2a. Mailing Address

26 11338 LAKE MANDARIN

Suite, Apt. #, etc.

27 CIRCLE, EAST

City & State

28 JACKSONVILLE, FLORIDA

Zip

29 32223

Country

30 USA

9. Name and Address of Current Registered Agent

WILKINSON, EDGAR L

12983 SILVER OAK DRIVE

JACKSONVILLE FL 32223

10. Name and Address of New Registered Agent

81 Name

WILKINSON, EDGAR L.

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

11338 LAKE MANDARIN CIRCLE, EAST

83

84 City

JACKSONVILLE

FL

85 Zip Code

32223

I, the undersigned, being a resident qualified person, do hereby certify that I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: Edgar L. Wilkinson

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

(NOTE: Registered Agent signature required when reinstating)

DATE: 9/9/99

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	DELETED	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
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D WILKINSON, EDGAR L 12983 SILVER OAK DRIVE JACKSONVILLE FL 32223	<input type="checkbox"/>							11338 LAKE MANDARIN CIRCLE, EAST																	
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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  
provided 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  
on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Edgar L. Wilkinson

9/16/99

904-353-4686

CR2E034 (5/99)

FILED  
Sep 15, 1999 8:00 am  
Secretary of State

09-15-1999 90003 001 \*\*\*550.00

