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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V16837** (9)

1. Corporation Name

BOB WYLIE, INCORPORATED



Principal Place of Business

1853 S. 8TH STREET
STE A
FERNANDINA BEACH FL 32034
US

Mailing Address

P.O. BOX 6134
STE A
FERNANDINA BEACH FL 32035
US

3. Date Incorporated or Qualified

02/25/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 1939 S. 8th St.

25 Suite, Apt. #, etc.

22 Suite #6

27 Suite, Apt. #, etc.

23 Fernandina Bch. FL

28 City & State

24 32034

29 City & State

25 NASSAU

30 City & State

26 32034

31 City & State

27 32034

32 City & State

28 32034

33 City & State

29 32034

34 City & State

30 32034

35 City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WYLIE, R. F. JR.
1853 SOUTH 8TH STREET
STE A
FERNANDINA BEACH FL 32034

81 Name Wylie, R. F. Jr.

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

83 1939 S. 8th St. Ste. #6

84 City Fernandina Bch. FL 85 Zip Code 32034

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

DPS WYLIE, R. F. JR. 1407 AMY DR YULEE FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP

T WYLIE, R. F. JR. 1407 AMY DR YULEE FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP

V WYLIE, ROBERT M 1407 AMY DR YULEE FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP

V MUDD, ANGELINE B 1853 SOUTH 8TH STREET FERNANDINA BEACH FL

TITLE NAME STREET ADDRESS CITY - ST - ZIP

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TITLE NAME STREET ADDRESS CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP

DPS Wylie R.F. Jr. 1485 Amy Dr. Yulee, FL 32097

2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP

T Wylie R.F. Jr. 1485 Amy Dr. Yulee, FL 32097

3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP

V Wylie, Robert M 1521 Amy Dr. Yulee, FL 32097

4 1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP

V Wylie, Bonnie L. 1485 Amy Dr. Yulee, FL 32097

5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

5 1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

6 1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

6 1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

R. F. Wylie President

Date

4-17-96

Daytime Phone #

(904) 272-2045

CR2E034 (12/95)