

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

06 OCT 23 PM 12:56

DOCUMENT # F04000001745

1. Entity Name  
THE CONSULTING NETWORK, INC.



Principal Place of Business  
209 WASHINGTON STREET  
MIDDLETOWN, MD 21769-8014

Mailing Address  
209 WASHINGTON STREET  
MIDDLETOWN, MD 21769-8014

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09112006 Chg-P CR2E034 (11/05)

4. FEI Number  
52-1981248

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
DP  
WILSON, TIMOTHY A  
209 WASHINGTON STREET  
MIDDLETOWN, MD 217698014 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
HOGUE, ROBERT F  
14790 TRIADDELPHIA MILL ROAD  
DAYTON, MD 210361215 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
WOODFORD, DAVID  
705 RANDI DRIVE  
LEESBURG, VA 20175 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
PRUITT, ANDRE  
10415 CROSSING CREEK ROAD  
POTOMAC, MD 20854 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
T  
STAUDENMEIER, LINDA  
1003 LINDFIELD DRIVE  
FREDERICK, MD 21702 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition  
800081774148  
11/14/06--01073--017 \*\*\$61.25

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Timothy A. Wilson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TIMOTHY A. WILSON

9/26/2006

301-371-8087

Date

Daytime Phone #