2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000002034

SANFORD, FL 32771

City-St-Zip:

Entity Name: WILSON CONSULTANTS ENTERPRISE CORP

FILED Aug 07, 2006 Secretary of State

Littly Na	IIIe. VVILGOIV	CONSOLIANTS LITTERFRIC	DL CORP.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
22980 LYN SORREN	NX CT TO, FL 32776		2469 JOHN YOUNG P. SUITE P ORLANDO, FL 32804		
Current N	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
P.O. BOX HOUMA, L					
FEI Number	: 36-4471315	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	f New Registered Agent:	
178 OSPR	SHELDON REY HAMMOC D, FL 32771	K TRL US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	WILSON, SHE	HAMMOCK TRL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	WILSON, AYA) Delete NNA HAMMOCK TRL	Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHELDON WILSON CP 08/07/2006