

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F05000002034

FILED
Aug 17, 2006
Secretary of State

Entity Name: WILSON CONSULTANTS ENTERPRISE CORP.

Current Principal Place of Business:

2469 JOHN YOUNG PARKWAY
SUITE P
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9156
HOUMA, LA 70361

New Mailing Address:

FEI Number: 36-4471315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, SHELDON
178 OSPREY HAMMOCK TRL
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: WILSON, SHELDON
Address: 178 OSPREY HAMMOCK TRL
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: WILSON, AYANNA
Address: 178 OSPREY HAMMOCK TRL
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: WILSON, SHELDON L
Address: 178 OSPREY HAMMOCK TRL
City-St-Zip: SANFORD, FL 32771

Title: S (X) Change () Addition
Name: WILSON, PATRICIA
Address: 22980 LYNX COURT
City-St-Zip: SANFORD, FL 32771

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: SHELTON L. WILSON

CEO

08/17/2006

Electronic Signature of Signing Officer or Director

Date