2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005003

City-St-Zip: CONYERS, GA 30094

Entity Name: WILDER STRUCTURES, INC

FILED Aug 21, 2006 Secretary of State

Entity Nan	ne: WILDER STRUCTURES, INC.		
Current Principal Place of Business:		New Principal Place of Business:	
	ERCE DRIVE , GA 30094		
Current Mailing Address:		New Mailing Address:	
19 PARK AVENUE ST. AUGUSTINE, FL 32084		24 CATHEDRAL PLACE SUITE 207 ST. AUGUSTINE, FL 32084	
FEI Number:	58-2576152 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
FURIS, JAMES R 19 PARK AVENUE ST. AUGUSTINE, FL 32084 US		FURIS, JAMES R 8 BAYVIEW DRIVE ST. AUGUSTINE, FL 32084 US	
The above in the State	named entity submits this statement for the p of Florida.	ourpose of changing its registered office or registered agent, or b	oth,
SIGNATURE:		08/21/2006	
	Electronic Signature of Registered Age	ent Date	
Election Carr	npaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS:
Title: Name: Address: City-St-Zip:	P () Delete WILDER, BRUCE 4870 WESTLAKE DRIVE CONYERS, GA 30094	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VPT () Delete PARHAM, VINCE 70 OLD POND RD COVINGTON, GA 30014	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address:	S () Delete WILDER, BRUCE 4870 WESTLAKE DRIVE	Title: () Change () Addition Name: Address:	

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.

City-St-Zip:

SIGNATURE: BRUCE WILDER PRES 08/21/2006