2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 18, 2005 08:00 AM Secretary of State DOCUMENT # N02000007997 1. Entity Name WISDOM AND KNOWLEDGE IS UNDERSTANDING, INC. Principal Place of Business Mailing Address 1403 DUNN AVENUE, SUITE 17 JACKSONVILLE FL 32218 PO BOX 26098 JACKSONVILLE FL 32226 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 14-1866626 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BARLOW, A.WELLINGTON ESQ Street Address (P.O. Box Number is Not Acceptable) 1403 DUNN AVENUE, SUITE 17 JACKSONVILLE FL 32218 City 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be \Box Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete Change ☐ Addition . 03/18/05-80047-001 61.25 HAYLE, PATRICK NAME 775 ARRAN COURT STREET ADDRESS STREET ADDRESS ORANGE PARK FL 32073 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE SALTER, TONY L NAME NAME 11826 JOHN WILLIAM TERRACE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32218 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete HILE ☐ Change Addition BARLOW, A.WELLINGTON ESQ. NAME NAME 1403 DUNN AVENUE, SUITE 17 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32218 CITY-ST-7/P CITY-ST-7(P TITLE ☐ Change ☐ Addition TITLE Defete HALL, STEVE REV. NAME NAME 4241 BAYMEADOWS RD., #11 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32217 CITY - ST - ZIP CHY-ST-ZIP Delete ☐ Change ☐ Addition TITI F HOLMES, BILLIE NAME 8857 CANTERBURY COVE STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP CITY - ST- 719 ☐ Change Addition TITLE Delete TITLE JENSEN, CHARLOETTE NAME NAME 12974 BRADY ROAD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32223 CITY-ST-ZIP CITY - ST - ZIP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:

A.W. 1866 Or R.W. 1866 Or R.W

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT