2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P01000077067 1. Entity Name WHEAT ENTERPRISES SACRED HEART, INC. Principal Place of Business Mailing Address 5391 N. 9TH AVE 6091 ST. GEORGE ST. PENSACOLA, FL 32504 PACE, FL 32571

FILED May 01, 2008 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE	04292008 No Chg-P CR2E034 (11/05)
	4. FEt Number Applied For 59-3738984 Not Applicable
	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	
WHEAT, TIMOTHY D 6091 ST. GEORGE ST. PACE, FL 32571	DO NOT WRITE IN THIS SPACE
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 it applicable. (NOTE: Registered	id Agent signature required when reinstating) DATE
. Sagnature, typeu to printed name of registrator egost and time if applicative. (Note: Literates	4
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.	
10 OFFICERS AND DIRECTORS	
TITLE P NAME WHEAT, TIMOTHY D STREET ADDRESS 6091 ST. GEORGE ST. CITY-ST-ZIP PACE, FL 32571	
TITLE VP NAME WHEAT, TONNA D STREET ADDRESS 6091 ST. GEORGE ST. CITY-ST-ZIP PACE, FL. 32571	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME (L. L.) (1) A COURT OF A COU	6000 m 1008 ft 1000 m 1
12. I hereby certify that the information supplied with this filing does not qualify for the exe	emptions contained in Chapter 119, Florida Statutes. I further certify that the information ture shall have the same legal effect as if made under oath; that I am an officer or director

indicated on his report or supplemental reports stude and that my signature shall have the same legal effect as inflated under cash, many affects of the corporation or his 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: _