

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026375

FILED  
Jan 24, 2006  
Secretary of State

Entity Name: WILSON AND WILSON GENERAL CONTRACTORS, INC.

## Current Principal Place of Business:

543 107TH AVE N  
NAPLES, FL 34108

## New Principal Place of Business:

1040 COLLIER CENTER WAY  
SUITE 12  
NAPLES, FL 34110

## Current Mailing Address:

543 107TH AVE N  
NAPLES, FL 34108

## New Mailing Address:

1040 COLLIER CENTER WAY  
SUITE 12  
NAPLES, FL 34110

FEI Number: 01-0656060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, HAROLD D P  
543 107TH AVE N  
NAPLES, FL 34108 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILSON, HAROLD D  
Address: 543 107TH AVE N  
City-St-Zip: NAPLES, FL 34108

Title: V ( ) Delete  
Name: WILSON, CHAD RICK  
Address: 543 107TH AVE N  
City-St-Zip: NAPLES, FL 34108

Title: T ( ) Delete  
Name: SORIANO, GREGORY  
Address: 83A PALM VIEW DR  
City-St-Zip: NAPLES, FL 34110

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: SORIANO, GREGORY  
Address: 2631 GULF VIEW DR  
City-St-Zip: NAPLES, FL 34112

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: HAROLD WILSON

V

01/24/2006

Electronic Signature of Signing Officer or Director

Date