

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000056682

Entity Name: SHARON WILSON, INC.

FILED  
Jan 14, 2006  
Secretary of State

## Current Principal Place of Business:

106 S. E. FT. KING ST  
OCALA, FL 34471

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 484  
CANDLER, FL 32111

## New Mailing Address:

FEI Number: 04-3642301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, SHARON  
106 S E FT. KING ST  
OCALA, FL 34474 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: PD ( ) Delete  
Name: WILSON, SHARON  
Address: 514 SW 2ND AVE,  
City-St-Zip: OCALA, FL 34474

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILSON, SHARON  
Address: PO BOX 484  
City-St-Zip: CANDLER, FL 32111

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: SHARON L WILSON

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01/14/2006

Electronic Signature of Signing Officer or Director

Date