

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025663

Entity Name: PHIL WILSON DESIGN, INC.

FILED  
Apr 04, 2007  
Secretary of State

## Current Principal Place of Business:

358 E. BLOOMINGDALE AVENUE  
BRANDON, FL 33511

## New Principal Place of Business:

8454 YOUNG AVENUE NE  
ROCKFORD, MI 49341

## Current Mailing Address:

358 E. BLOOMINGDALE AVENUE  
BRANDON, FL 33511

## New Mailing Address:

8454 YOUNG AVENUE NE  
ROCKFORD, MI 49341

FEI Number: 38-3631927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, PHILIP  
358 E. BLOOMINGDALE  
BRANDON, FL 33511 US

## Name and Address of New Registered Agent:

WILSON, PHILIP  
8454 YOUNG AVENUE NE  
ROCKFORD, FL 49341 US

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:

04/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILSON, PHILIP  
Address: 358 E. BLOOMINGDALE AVENUE  
City-St-Zip: BRANDON, FL 33511

Title: VST ( ) Delete  
Name: WILSON, AMY  
Address: 358 E. BLOOMINGDALE AVENUE  
City-St-Zip: BRANDON, FL 33511

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WILSON, PHILIP  
Address: 8454 YOUNG AVENUE NE  
City-St-Zip: ROCKFORD, MI 49341

Title: VST (X) Change ( ) Addition  
Name: WILSON, AMY  
Address: 8454 YOUNG AVENUE NE  
City-St-Zip: ROCKFORD, MI 49341

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: AMY M WILSON

VST

04/04/2007

Electronic Signature of Signing Officer or Director

Date