

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 20, 2006 8:00 am
Secretary of State

03-01-2006 90009 033 ***150.00

DOCUMENT # P05000041633 1. Entity Name WIRELESS UNIVERSITY, INC.					
Principal Place of Business 2560 E. US HWY. 50, SUITE 108 CLERMONT, FL 34711			Mailing Address 2560 E. US HWY. 50, SUITE 108 CLERMONT, FL 34711		
2. Principal Place of Business 600 N. HWY 27 <small>Suite, Apt. #, etc.</small>		3. Mailing Address 600 N. HWY 27 <small>Suite, Apt. #, etc.</small>			
City & State MINNEOLA, FL <small>Zip</small> 34715 <small>Country</small> LAKE		City & State MINNEOLA, FL <small>Zip</small> 34715 <small>Country</small> LAKE		4. FEL Number 55-0906499	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent JORDAN, EDWARD P II 1460 E. HWY. 50 CLERMONT, FL 34711			7. Name and Address of New Registered Agent Name JORDAN, EDWARD P. II Street Address (P.O. Box Number is Not Acceptable) 604 N. HWY 27 City MINNEOLA FL <small>Zip Code</small> 34715		
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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKAY, DAVID 2560 E. US HWY. 50, SUITE 108 CLERMONT, FL 34711 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MCKAY, DAVID B. 600 N. HWY 27 MINNEOLA, FL 34715 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE:			Date 2/27/06 352-242-2177		

66005906



02212006 Chg-P CR2E034 (11/05)



ATTACHMENT

66 005906

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2006

WIRELESS UNIVERSITY, INC.
600 N. HWY 27
MINNEOLA, FL 34715

Subject: **WIRELESS UNIVERSITY, INC.**

Reference Number: **P05000041633**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION