

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000134275

FILED
Jan 27, 2006
Secretary of State

Entity Name: WILAMORE SERVICES, INC.

Current Principal Place of Business:

23 PRINCESS KIM LANE
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

1800 OLD MOODY BLVD
UNIT 503
BUNNELL, FL 32110

New Mailing Address:

PO BOX 1593
BUNNELL, FL 32110

FEI Number: 04-3828988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, JERRY C
4721 E MOODY BLVD
BLDG #5, SUITES 505 & 506
BUNNELL, FL 32210 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: PSD () Delete
Name: MOREIRA, JOSE C
Address: 23 PRINCESS KIM LANE
City-St-Zip: PALM COAST, FL 32164

Title: VPTD () Delete
Name: WILLOUGHBY, BILLY D
Address: 200 N RAILROAD STREET
City-St-Zip: BUNNELL, FL 32110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOSE C MOREIRA

PSD

01/27/2006

Electronic Signature of Signing Officer or Director

_____ Date