2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095414

Entity Name: WOLFCREEK CONSULTING INC.

FILED Jul 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10001 NW 50TH STREET 5850 CORAL RIDGE DR

SUITE 202 SUITE 315

SUNRISE, FL 33351 US CORAL SPRINGS, FL 33076 US

Current Mailing Address: New Mailing Address:

10001 NW 50TH STREET 5850 CORAL SPRINGS DR

SUITE 202 SUITE 315

SUNRISE, FL 33351 US CORAL SPRINGS, FL 33076 US

FEI Number: 20-5214140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NORRELL, ROBERT 8751 W. BROWARD BLVD. #410 PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: REYNOLDS, JUACANE L
Address: 10001 NW 50TH STREET, SUITE 202
Name: REYNOLDS, JUACANE L
Address: 5850 CORAL RIDGE DR, STE 315

Address: 10001 NW 50TH STREET, SUITE 202 Address: 5850 CORAL RIDGE DR, STE 315
City-St-Zip: SUNRISE, FL 33351 US City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 REYNOLDS, ADRIENNE C
 Name:
 REYNOLDS, ADRIENNE C

 Address:
 10001 NW 50TH STREET, SUITE 202
 Address:
 5850 CORAL RIDGE DR., STE 315

 City-St-Zip:
 SUNRISE, FL 33351 US
 City-St-Zip:
 CORAL SPRINGS, FL 33076 US

I hereby certify that the information supplied with this filing does not qualify 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: JAY REYNOLDS P 07/24/2008