

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000124135

Entity Name: WILSON INSURANCE GROUP INC.

FILED
Jul 02, 2008
Secretary of State

Current Principal Place of Business:

6543 REDWOOD OAKS DRIVE
ORLANDO, FL 32818

New Principal Place of Business:

6239 EDGEWATER DR.
1V-3
ORLANDO, FL 32810

Current Mailing Address:

6543 REDWOOD OAKS DRIVE
ORLANDO, FL 32818

New Mailing Address:

6239 EDGEWATER DR.
1V-3
ORLANDO, FL 32810

FEI Number: 22-3972483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

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:

Title: PD () Delete
Name: WILSON, LAJUANA
Address: 6543 REDWOOD OAKS DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: SV () Delete
Name: WILSON, ROBERT
Address: 6543 REDWOOD OAKS DRIVE
City-St-Zip: ORLANDO, FL 32818

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 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: LAJUANA WILSON

PD

07/02/2008

Electronic Signature of Signing Officer or Director

Date