

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000019342

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** M & M WILDING ENTERPRISES, INC.

**Current Principal Place of Business:**

7087 GRAND NATIONAL DRIVE  
SUITE 100  
ORLANDO, FL 32819

**New Principal Place of Business:**

233 ALDRIDGE LANE  
DAVENPORT, FL 33897

**Current Mailing Address:**

7087 GRAND NATIONAL DRIVE  
SUITE 100  
ORLANDO, FL 32819

**New Mailing Address:**

233 ALDRIDGE LANE  
DAVENPORT, FL 33897

**FEI Number:** 38-3785174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LAVIGNE, JAMES R ESQ.  
% LAVIGNE, COTON & ASSOCIATES, P.A.  
7087 GRAND NATIONAL DRIVE, SUITE 100  
ORLANDO, FL 32819 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: D  
Name: WILDING, MARK  
Address: 233 ALDRIDGE LANE  
City-St-Zip: DAVENPORT, FL 33897 US

Title: D  
Name: WILDING, MARIA  
Address: 233 ALDRIDGE LANE  
City-St-Zip: DAVENPORT, FL 33897 US

I hereby 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 all other like empowered.

SIGNATURE: MARIA WILDING

D

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date