

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099946

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** WILSON DEVELOPMENT CONSULTING SERVICES, INC.

**Current Principal Place of Business:**

10601 WAXBERRY COURT  
TAMPA, FL 33624

**New Principal Place of Business:**

8906 CITRUS VILLAGE DR  
304  
TAMPA, FL 33626

**Current Mailing Address:**

P.O. BOX 270302  
TAMPA, FL 33688

**New Mailing Address:**

FEI Number: 26-3686141      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILSON, SHAWN C  
10601 WAXBERRY COURT  
TAMPA, FL 33624    US

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

WILSON, SHAWN C  
8906 CITRUS VILLAGE DR.  
304  
TAMPA, FL 33626    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: SHAWN WILSON

04/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title:            PRES  
Name:            WILSON, SHAWN C  
Address:        8906 CITRUS VILLAGE DR. #304  
City-St-Zip:    TAMPA, FL 33626

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: SHAWN WILSON

PRES

04/16/2012

Electronic Signature of Signing Officer or Director

Date