## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000010989

Address:

City-St-Zip:

PO BOX 784013

WINTER GARDEN, FL 34778

FILED Apr 30, 2007 Secretary of State

Entity Na	me: WHEATON CON	ISTRUCTION SERVIC	CES, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 7 WINTER (	84013 3ARDEN, FL 34778	US	17261 HEARTWOOI WINTER GARDEN, I		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
PO BOX 7 WINTER (	84013 3ARDEN, FL 34778	US			
FEI Number	: 65-0855552 FEI N	umber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
WHEATON, TONI PO BOX 784013 WINTER GARDEN, FL 34778 US				WHEATON, TONI 17261 HEARTWOOD LOOP WINTER GARDEN, FL 34787 US	
	named entity submits of Florida.	this statement for the p	purpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: TONI WHEATON				04/30/2007	
	Electronic Sign	ature of Registered Ag	ent	Date	
Election Car	npaign Financing Trust F	und Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P/S ( ) Delete WHEATON, TONI PO BOX 784013 WINTER GARDEN, FL	34778	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete WHEATON, KEITH PO BOX 784013 WINTER GARDEN, FL	34778	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	T () Delete WHEATON, SAMANTHA		Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: TONI WHEATON P/S 04/30/2007