

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000058754

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: PARENTS AND CHILDREN ENTERPRISE INC.

**Current Principal Place of Business:**

4609 SANDWEDGE WAY  
SEBRING, FL 33872

**New Principal Place of Business:**

**Current Mailing Address:**

4609 SANDWEDGE WAY  
SEBRING, FL 33872

**New Mailing Address:**

FEI Number: 65-0500910

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, ERIC O  
4609 SANDWEDGE WAY  
SEBRING, FL 33872 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, ERIC O  
Address: 4609 SANDWEDGE WAY  
City-St-Zip: SEBRING, FL 33872

Title: VD ( ) Delete  
Name: WILSON, ALENCIA F  
Address: 4609 SANDWEDGE WAY  
City-St-Zip: SEBRING, FL 33872

Title: SD (X) Delete  
Name: BULLOCK, CARLA  
Address: 4801 MACKEREL DR.  
City-St-Zip: SEBRING, FL 33887

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ERIC O WILSON

PD

07/11/2006

Electronic Signature of Signing Officer or Director

Date