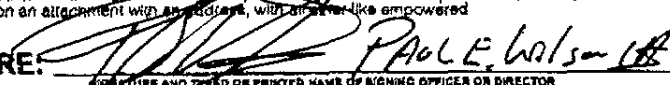


FILED
May 02, 2006 08:00 AM
Secretary of State

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000037248		
1. Entity Name P.E. WILSON CONSTRUCTION, INC.		
Principal Place of Business 21 SE WENONA AVENUE OCALA, FL 34471		Mailing Address 21 SE WENONA AVENUE OCALA, FL 34471
DO NOT WRITE IN THIS SPACE		
		 02232008 No Chg.-P CR2E034 (11/05)
4. FEI Number 59-3318019		Applied For ☐ No: Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent WILSON, PAUL E III 18252 NE 40TH STREET WILLISTON, FL 32696		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and if applicable. (NOTE: Registered Agent's signature required when renewing) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILSON, PAUL E III 18252 N.E. 40TH ST WILLISTON, FL 32696	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILSON, SOUNDRA H 18252 N.E. 40TH ST WILLISTON, FL 32696	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addressee, with an officer-like empowered		
SIGNATURE:  PAUL E. Wilson III		Date: 4/28/06 352528-5422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Day/Time Phone #

352-528-9289