

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000100416
 1. Entity Name
WILSON ENTERPRISES, INC.



Principal Place of Business: **7960 NW 89TH LANE TAMARAC, FL 33321**
 Mailing Address: **210 FOURTH ST DRAVOSBURG, PA 15034**



03072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number: **65-0965094** (Applied For / Not Applicable)
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WILSON, ROBERT
8046 SANIBEL DR
TAMARAC, FL 33321

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000093828
 03/22/04-80035-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WILSON, ROBERT
STREET ADDRESS	110 LEXINGTON ROAD
CITY-ST-ZIP	ELIZABETH TOWNSHIP, PA 15135
TITLE	VP
NAME	TIFFANY, CHRISTA E
STREET ADDRESS	110 LEXINGTON ROAD
CITY-ST-ZIP	ELIZABETH TOWNSHIP, PA 15135
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 exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Christa E. Wilson* Date: **3/17/04** Dialectic Phone: **412-460-1400**