

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J98920

Entity Name: W.C. DATA, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

1800 OLD OKEECHOBEE RD
SUITE 100
WEST PALM BEACH, FL 334095207 US

New Principal Place of Business:

1779 N. CONGRESS AVE
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

C/O DAVID A DANIELSON
1800 OLD OKEECHOBEE RD SUITE 100
WEST PALM BEACH, FL 334095207 US

New Mailing Address:

C/O DAVID A DANIELSON
1779 N. CONGRESS AVE
WEST PALM BEACH, FL 33401 US

FEI Number: 65-0041299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANIELSON, DAVID A.
1800 OLD OKEECHOBEE RD
SUITE 100
WEST PALM BEACH, FL 334095207 US

Name and Address of New Registered Agent:

DANIELSON, DAVID A MR.
1779 N. CONGRESS AVE
WEST PALM BEACH, FL 33401 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: DAVID A. DANIELSON

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DANIELSON, DAVID A.,
Address: 1800 OLD OKEECHOBEE RD SUITE 100
City-St-Zip: WEST PALM BEACH, FL 334095207

Title: S (X) Delete
Name: DOWNING, LYNN,
Address: 233 DAVIS ROAD
City-St-Zip: PALM SPRINGS, FL

Title: P () Delete
Name: PARRISH, CLYDE,
Address: 1501 GULF BLVD, #304
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: DANIELSON, DAVID A.,
Address: 1779 N. CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33401

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

Title: P (X) Change () Addition
Name: PARRISH, CLYDE,
Address: 4004 LIGUSTRUM DR.
City-St-Zip: PALM HARBOR, FL 34685

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID A. DANIELSON

DS

04/28/2005

Electronic Signature of Signing Officer or Director

Date