

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M52588

FILED
Apr 24, 2006
Secretary of State

Entity Name: W P, INC.

Current Principal Place of Business:

1360 TERMINAL TOWER
50 PUBLIC SQUARE
CLEVELAND, OH 44113 US

New Principal Place of Business:

50 PUBLIC SQUARE
1360 TERMINAL TOWER
CLEVELAND, OH 44113 US

Current Mailing Address:

1360 TERMINAL TOWER
50 PUBLIC SQUARE
CLEVELAND, OH 44113 US

New Mailing Address:

50 PUBLIC SQUARE
1360 TERMINAL TOWER
CLEVELAND, OH 44113 US

FEI Number: 34-1599626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONCHEIN, ROBERT F.,
Address: 1160 TERMINAL TOWER, 50 PUBLIC SQ.
City-St-Zip: CLEVELAND, OH 44113

Title: VP () Delete
Name: MILLER, SAMUEL H.,
Address: 1160 TERMINAL TOWER, 50 PUBLIC SQ.
City-St-Zip: CLEVELAND, OH 44113

Title: ST () Delete
Name: SMITH, THOMAS G
Address: 1160 TERMINAL TOWER, 50 PUBLIC SQ.
City-St-Zip: CLEVELAND, OH 44113

Title: D (X) Delete
Name: GUREN, SHELDON
Address: 1160 TERMINAL TOWER, 50 PUBLIC SQ.
City-St-Zip: CLEVELAND, OH 44113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MONCHEIN, ROBERT F.,
Address: 50 PUBLIC SQ., 1050 TERMINAL TOWER
City-St-Zip: CLEVELAND, OH 44113

Title: VP (X) Change () Addition
Name: MILLER, SAMUEL H.,
Address: 50 PUBLIC SQ., 1100 TERMINAL TOWER
City-St-Zip: CLEVELAND, OH 44113

Title: ST (X) Change () Addition
Name: SMITH, THOMAS G
Address: 50 PUBLIC SQ., 1100 TERMINAL TOWER
City-St-Zip: CLEVELAND, OH 44113

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: THOMAS G. SMITH

ST

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date