

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026193

FILED
Sep 23, 2008
Secretary of State

Entity Name: FLORIDA'S EXECUTIVE MANAGEMENT OF WPB, INC.

Current Principal Place of Business:

2240 PALM BEACH LAKE BLVD
400
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

2240 PALM BEACH LAKE BLVD
400
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 20-1003462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMRO ENTERPRISES & ACCTG. SVC, INC
2006 MICHIGAN AVE
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

NEEDLE, HAROLD
FLORIDA'S EXECUTIVE MANAGEMENT OF WPB, INC
2240 PALM BEACH LAKE BLVD
400
WEST PALM BEACH, FL 33409 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: HAROLD NEEDLE

09/23/2008

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: P () Delete
Name: NEEDLE, HAROLD
Address: 2240 PALM BEACH LAKE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V () Delete
Name: NEEDLE, FLORYN
Address: 2240 PALM BEACH LAKE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: HAROLD NEEDLE

P

09/23/2008

Electronic Signature of Signing Officer or Director

Date