## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000084468

Entity Name: WCSJR CORPORATION

WESTPORT, CT

City-St-Zip:

FILED Jan 13, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Plac	New Principal Place of Business:	
C/O ELWOOD B. DAVIS, NORTHEAST FINANCIAL CONSULTANTS, P.O. BOX 2630 WESTPORT, CT 06880			CONSULTANTS, 24	C/O ELWOOD B. DAVIS, NORTHEAST FINANCIAL CONSULTANTS, 244 SAUGATUCK AVE WESTPORT, CT 06880	
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
CONSULT	DOD B. DAVIS ANTS, P.O. B RT, CT 06880				
FEI Number	: 58-2278072	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
2390 TAM NAPLES, I	FL 34103 l	DRTH, SUITE 204 JS	purpose of changing its registe	red office or registered agent, or both,	
SIGNATU					
0.014/ (101		nic Signature of Registered Ag	ent	 Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	STEERE, WILI 27471 HARBO		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	D ( DAVIS, ELWO 244 SAUGATU		Title: Name: Address:	( ) Change ( ) Addition	

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: ELWOOD B DAVIS D 01/13/2008