

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000005986

**Entity Name:** WCA OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

2050 WEST SAM HOUSTON PARKWAY SOUTH  
HOUSTON, TX 77042

**Current Mailing Address:**

2050 WEST SAM HOUSTON PARKWAY SOUTH  
HOUSTON, TX 77042 US

**FEI Number:** 20-3753650

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DOVIGI, PATRICK  
Address        2050 WEST SAM HOUSTON  
                  PARKWAY SOUTH  
City-State-Zip: HOUSTON TX 77042

Title            TREASURER  
Name            PELOSI, JONATHAN LUCAS  
Address        2050 WEST SAM HOUSTON  
                  PARKWAY SOUTH  
City-State-Zip: HOUSTON TX 77042

Title            SECRETARY  
Name            GILBERT, MINDY  
Address        2050 WEST SAM HOUSTON  
                  PARKWAY SOUTH  
City-State-Zip: HOUSTON TX 77042

Title            DIRECTOR  
Name            DOVIGI, PATRICK  
Address        2050 WEST SAM HOUSTON  
                  PARKWAY SOUTH  
City-State-Zip: HOUSTON TX 77042

Title            ASSISTANT SECRETARY  
Name            BACHHUBER, MELISSA  
Address        2050 WEST SAM HOUSTON  
                  PARKWAY SOUTH  
City-State-Zip: HOUSTON TX 77042

*I hereby 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 all other like empowered.*

**SIGNATURE:** PATRICK DOVIGI

**PRESIDENT**

**04/04/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date