## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000000971

Entity Name: WPMC-FLORIDA, INC.

City-St-Zip:

COLUMBUS, GA 31904

FILED Jan 13, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2900 WARM SPRINGS ROAD COLUMBUS, GA 31904 **Current Mailing Address: New Mailing Address:** 2900 WARM SPRINGS ROAD COLUMBUS, GA 31904 FEI Number: 04-3603490 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCD ( ) Delete () Change () Addition GREEN, GENEVIEVE Name: Name: 2900 WARM SPRINGS ROAD Address: Address: City-St-Zip: COLUMBUS, GA 31904 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DURANT, CELIA G Name: 2900 WARM SPRINGS ROAD Address: Address: COLUMBUS, GA 31904 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete CFO KILGORE, PATTY MORGAN, BRAD Name: Name: 2900 WARM SPRINGS ROAD 2900 WARM SPRINGS ROAD Address: Address: City-St-Zip: COLUMBUS, GA 31904 City-St-Zip: COLUMBUS, GA 31904 Title: () Delete Title: () Change () Addition SMITH, KEVIN Name: Name: Address: 2900 WARM SPRINGS ROAD Address:

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.

City-St-Zip:

SIGNATURE: BRAD MORGAN CFO 01/13/2009