

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000007149

FILED
Jun 12, 2007
Secretary of State

Entity Name: WCA MANAGEMENT CORPORATION

Current Principal Place of Business:

7 SEACORT
VERO BEACH, FL 32963

New Principal Place of Business:

2770 INDIAN RIVER BLVD
VERO BEACH, FL 32960

Current Mailing Address:

7 SEACORT
VERO BEACH, FL 32963

New Mailing Address:

2770 INDIAN RIVER BLVD
VERO BEACH, FL 32960

FEI Number: 13-3152735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: BRIAN COURTNEY

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WELSH, PATRICK J
Address: 7 SEACORT
City-St-Zip: VERO BEACH, FL 32963

Title: VD () Delete
Name: ANDERSON, BRUCE K
Address: 116 SETTLERS ROW NORTH
City-St-Zip: PONTE VEDRA, FL 32082

Title: ST () Delete
Name: RATHER, JONATHAN M
Address: 320 PARK AVENUE, SUITE 2500
City-St-Zip: NEW YORK, NY 10022

Title: CD () Delete
Name: CARSON, RUSSELL L
Address: 320 PARK AVENUE, SUITE 2500
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: MCINERNEY, THOMAS E
Address: 320 PARK AVENUE, SUITE 2500
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JONATHAN M. RATHER

TREA

06/12/2007

Electronic Signature of Signing Officer or Director

Date