## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001898

**Entity Name: WEMBLEY PARK CORPORATION** 

FILED Jan 04, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6917 ARLINGTON ROAD, SUITE 303 6001 MONTROSE RD 606

BETHESDA, MD 20814

ROCKVILLE, MD 20852

**Current Mailing Address: New Mailing Address:** 

6917 ARLINGTON ROAD, SUITE 303 6001 MONTROSE RD BETHESDA, MD 20814

606

ROCKVILLE, MD 20852

FEI Number: 52-1974359 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:

MANN, ANDREW L P.A MANN & WOLF PA, ANDREW MANN 4300 N. UNIVERSITY DRIVE SUITE C-203 4300 N. UNIVERSITY DRIVE SUITE C-203

FT LAUDERDALE, FL 33351 SUNRISE, FL 33351 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: ANDREW L. MANN 01/04/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

WAGNER, K. PETER WAGNER, K. PETER Name: Name: 5020 COLLINS AVE, #1709 5020 COLLINS AVE, #1709 Address: Address: City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33140

Title: VD Title: () Delete () Change () Addition Name:

WAGNER, YVONNE Name: 5020 COLLINS AVE, #1709 Address: Address: MIAMI BEACH, FL 33140 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition SD ( ) Delete PSD

WAGNER, ELIZABETH Name: WAGNER, ELIZABETH Name: 9316 WINTERSET DRIVE 6001 MONTROSE RD #606 Address: Address: City-St-Zip: POTOMAC, MD 20854 City-St-Zip: ROCKVILLE, MD 20852

I hereby certify that the information supplied with this filing does not qualify for the 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: ELIZABETH WAGNER **PSD** 01/04/2006