## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K00260

Entity Name: WC REAL ESTATE HOLDINGS, INC.

Aug 11, 2003 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1900 AUSTRALIAN AVE 8895 N. MILITARY TRAIL

2ND FLOOR SUITE C-200

RIVERA BEACH, FL 33404 US PALM BEACH GARDENS, FL 33410 US

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

1900 AUSTRALIAN AVE 8895 N. MILITARY TRAIL

2ND FLOOR SUITE C-200

RIVERA BEACH, FL 33404 US PALM BEACH GARDENS, FL 33410 US

FEI Number: 52-1542528 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 RD. 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SULLIVAN, DAVID SULLIVAN, DAVID Name: Name: 1900 AUSTRIAN AVENUE 8895 N. MILITARY TRAIL, SUITE C-200 Address: Address:

City-St-Zip: RIVERA BEACH, FL City-St-Zip: PALM BEACH GARDENS, FL 33410 US

( ) Delete Title: DVP Title: (X) Change ( ) Addition Name: DE CHALENDAR, PIERRE-ANDRE Name: DE CHALENDAR, PIERRE-ANDRE 1900 AUSTRILIAN AVE 8895 N. MILITARY TRAIL, SUITE C-200 Address: Address: PALM BEACH GARDENS, FL 33410 US RIVERIA BEACH, FL City-St-Zip: City-St-Zip:

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

SABLE, JACK Name: SABLE, JACK Name:

330 PATTON DRIVE SW 330 PATTON DRIVE SW Address: Address: City-St-Zip: ATLANTA, GA 30066 City-St-Zip: ATLANTA, GA 30336 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACK SABLE DST 08/11/2003