## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42770

Entity Name: WMS CONSTRUCTION, INC.

**FILED** Mar 05, 2009 Secretary of State

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

C/O BARRON F. WHITE WMS CONSTRUCTION, INC. 2101 SO WAVERLY PL 2101 SO WAVERLY PL, SUITE 300 MELBOURNE, FL 32901 US MELBOURNE, FL 32901

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

C/O BARRON F. WHITE WMS CONSTRUCTION, INC 2101 SO WAVERLY PL 2101 SO WAVERLY PL, SUITE 300 MELBOURNE, FL 32901 US MELBOURNE, FL 32901 US

FEI Number: 59-2917837 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WHITE, BARRON F WHITE, BARRON F MR. 2101 SÓ WAVERLY PL 2101 SÓ WAVERLY PL MELBOURNE, FL 32901 SUITE 300 US MELBOURNE, FL 32901 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: BARRON F. WHITE 03/05/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change ( ) Addition WHITE, BARRON F., WHITE, BARRON F MR. Name: 480 MONACO DRIVE 480 MONACO DRIVE Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

٧S Title: Title: () Delete (X) Change ( ) Addition Name: MCKINNEY, CARL H., Name: MCKINNEY, CARH H MR.

3810 BURTON ROAD 3810 BURTON ROAD Address: Address: MALABAR, FL 32950 MALABAR, FL 32950 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition () Delete V. T

SELPH, ROBERT D., SELPH, ROBERT D MR. Name: Name: 1306 ARITON DR., N.E. 1306 ARITON DR., N.E. Address: Address: City-St-Zip: PALM BAY, FL 32905 City-St-Zip: PALM BAY, FL 32905

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: BARRON F. WHITE **PRES** 03/05/2009