

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K50538

Entity Name: WPI FLORIDA, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

1629 K ST NW, STE 1200
WASHINGTON, DC 20006 US

New Principal Place of Business:

Current Mailing Address:

639 E. OCEAN AVENUE
STE 406
BOYNTON BEACH, FL 33435 US

New Mailing Address:

9816 S. MILITARY TRAIL
SUITE C2-3
BOYNTON BEACH, FL 33436 US

FEI Number: 52-1603315 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: CAMALIER, F. DAVIS
Address: 1629 K ST NW, STE 1200
City-St-Zip: WASHINGTON, DC 20006 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: F DAVIS CAMALIER

MBR

04/16/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date