

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021461

Entity Name: WCS LENDING LLC

FILED
Jan 09, 2004
Secretary of State

Current Principal Place of Business:

7700 CONGRESS AVENUE
SUITE 3216
BOCA RATON, FL 33487

Current Mailing Address:

7700 CONGRESS AVENUE
SUITE 3216
BOCA RATON, FL 33487

New Principal Place of Business:

6501 CONGRESS AVENUE
SUITE 240
BOCA RATON, FL 33487

New Mailing Address:

6501 CONGRESS AVENUE
SUITE 240
BOCA RATON, FL 33487

FEI Number: 26-0001165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLBERG, ERIC
7700 CONGRESS AVENUE
SUITE 3216
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

WALLBERG, ERIC
6501 CONGRESS AVENUE
SUITE 240
BOCA RATON, FL 33487 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: ERIC M. WALLBERG

01/09/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CEPEDA, CARLOS V
Address: 9262 BROAD STREET
City-St-Zip: BOCA RATON, FL 33434

Title: MGRM () Delete
Name: WALLBERG, ERIC
Address: 9120 BROAD STREET
City-St-Zip: BOCA RATON, FL 33434

Title: MGR (X) Delete
Name: RUBINSTEIN, ROBERT
Address: 1915 LAVER CIRCLE, APT E105
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: RAIMI, HARVEY
Address: 4818 PARK HILL COURT
City-St-Zip: WEST BLOOMFIELD, MI 48323

Title: MGR () Delete
Name: CEPEDA, CARLOS M
Address: 370 PARK HILL AVENUE
City-St-Zip: YONKERS, NY 10705

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CEPEDA, CARLOS V
Address: 6349 LAS FLORES DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM (X) Change () Addition
Name: WALLBERG, ERIC
Address: 15614 MESSINA ISLES CT
City-St-Zip: DELRAY BEACH, FL 33446

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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CARLOS V. CEPEDA

MR.

01/09/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date