

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028829

Entity Name: WCT & ASSOCIATES, LLC

FILED
Feb 25, 2004
Secretary of State

Current Principal Place of Business:

1900 SUNSET HARBOUR DRIVE
1015
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1900 SUNSET HARBOUR DRIVE
1015
MIAMI BEACH, FL 33139 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

TRAFTON, DAVID C
1900 SUNSET HARBOUR DRIVE
1015
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

FLORIDA INCORPORATING AND REGISTERED AGENT
122 WEST HILLCREST STREET
ALTAMONTE SPRINGS, FL 32714 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: CHRISTINE FOX

02/25/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: TRAFTON, DAVID C
Address: 1900 SUNSET HARBOUR DRIVE, #1015
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: TRAFTON, ROCHELLE M
Address: 1900 SUNSET HARBOUR DRIVE, #1015
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: TRAFTON, WILBUR
Address: 1900 SUNSET HARBOUR DRIVE, #1015
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Delete
Name: TRAFTON, MARY
Address: 1900 SUNSET HARBOUR DRIVE, #1015
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROCHELLE TRAFTON

MS.

02/25/2004

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