2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2004
Secretary of State

DOCUMENT# L03000028829

Entity Name: WCT & ASSOCIATES, LLC

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:

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

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: DAVID C. TRAFTON MGR 04/23/2004

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