

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L21854

1. Entity Name
WTC HOLDINGS, INC.



Principal Place of Business
**1101 CHANNELSIDE DRIVE
TAMPA, FL 33602**

Mailing Address
**1101 CHANNELSIDE DRIVE
TAMPA, FL 33602**

DO NOT WRITE IN THIS SPACE



03132006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2974050

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BIERLEY, JOHN C
100 NORTH TAMPA STREET
STE 2120
TAMPA, FL 33602**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**ST
GARY, JOHN H III
4228 ARBORWOOD LANE
TAMPA, FL 33624**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DP
BIERLEY, JOHN C
100 NORTH TAMPA STREET, STE. 2
TAMPA, FL 33602**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DVP
CISNEROS, FRANK G
500 NORTH WESTSHORE BLVD. #405
TAMPA, FL 33609**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000473373
03/31/06-80013-022 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J.H. GARY, SECRETARY

MAR. 15, 2006

Date

(813) 864-3600

Daytime Phone #