## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Jul 10, 2007 08:00 AM DOCUMENT # L21854 **Secretary of State** 1. Entity Name WTC HOLDINGS, INC. Principal Place of Business Mailing Address 1101 CHANNELSIDE DRIVE 1101 CHANNELSIDE DRIVE TAMPA, FL 33602 TAMPA, FL 33602 07052007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2974050 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent BIERLEY, JOHN C DO NOT WRITE 100 NORTH TAMPA STREET STE 2120 IN THIS SPACE TAMPA, FL 33602 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 OFFICERS AND DIRECTORS 10. TITLE GARY, JOHN H III NAME STREET ADDRESS 4228 ARBORWOOD LANE CITY-SI-ZIP TAMPA, FL 33624 D۶ 31712 BIERLEY, JOHN C U00000767629 07/10/07-80012-007 150.00 NAME STREET ADDRESS 100 NORTH TAMPA STREET, STE, 2 CITY-ST-ZIP TAMPA, FL 33602 DVP TITLE CISNEROS, FRANK G NAME STREET ADDRESS 500 NORTH WESTSHORE BLVD. #405 DO NOT WRITE CHY-SI-ZIP TAMPA, FL 336097 IN THIS SPACE TIRE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ABORESS CRY-ST-ZIP THLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied entail 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 of trustee entroversor 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 emsowered.

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STREET ADDRESS CITY-ST-ZIP

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7/7/07

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