

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M75399

Entity Name: W/C STUDIO, INC.

FILED  
Apr 08, 2003  
Secretary of State

## Current Principal Place of Business:

208 PROVIDENCE RD.  
ANNAPOLIS, MD 21401 US

## New Principal Place of Business:

## Current Mailing Address:

208 PROVIDENCE RD.  
ANNAPOLIS, MD 21401 US

## New Mailing Address:

FEI Number: 59-2891321

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LANESE, NICK  
12944 PRESTWICK DR.  
SUITE 203  
RIVERVIEW, FL 33569 US

## Name and Address of New Registered Agent:

LANESE, NICK  
701-C DEL WEBB BLVD  
SUN CITY CENTER, FL 33573 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:

04/08/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVT ( ) Delete  
Name: COMPORT, ALLAN,  
Address: 208 PROVIDENCE RD.  
City-St-Zip: ANNAPOLIS, MD

Title: DPS ( ) Delete  
Name: COMPORT, SALLY,  
Address: 208 PROVIDENCE RD.  
City-St-Zip: ANNAPOLIS, MD

Title: D ( ) Delete  
Name: LANESE, NICK,  
Address: 12944 PRESTWICK DR  
City-St-Zip: RIVERVIEW, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN COMPORT

DVT

04/08/2003

Electronic Signature of Signing Officer or Director

Date