


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90353 047 ****61.25

DOCUMENT # N12200 1. Entity Name W B C COMMUNICATIONS, INC.					
Principal Place of Business 7775 HERLONG ROAD JACKSONVILLE, FL 32210			Mailing Address 7775 HERLONG ROAD JACKSONVILLE, FL 32210		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03242006 Chg-NP CR2E037 (11/05)	
Zip		Country		4. FEI Number 59-1028789	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RUSSELL, CARL K 7775 HERLONG RD JAX, FL 32210				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RUSSELL, CARL K		NAME		
STREET ADDRESS	7775 HERLONG RD		STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE, FL 32210		CITY - ST - ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GLADDEN, MICHAEL		NAME	Director	
STREET ADDRESS	9627 GROVE HILL LANE		STREET ADDRESS	Dykes, Wesley	
CITY - ST - ZIP	JACKSONVILLE, FL 32222		CITY - ST - ZIP	7775 Herlong Rd Jacksonville, FL 32210	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NELSON, SUSAN S		NAME	Director	
STREET ADDRESS	8936 COUNTRY MILL LANE		STREET ADDRESS	Rasmussen, Susan Nelson	
CITY - ST - ZIP	JACKSONVILLE, FL 32222		CITY - ST - ZIP	8936 Country Mill Lane Jacksonville, FL 32222	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DOUGLAS, EVA H.		NAME		
STREET ADDRESS	9664 HERSHAM CT		STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE, FL		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SIMMONS, MYRA F.		NAME		
STREET ADDRESS	5400-10 LAMOYA AVENUE		STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE, FL 32210		CITY - ST - ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	STOLL, JEFF		NAME	Secretary	
STREET ADDRESS	7775 HERLONG ROAD		STREET ADDRESS	Henry, Aaron	
CITY - ST - ZIP	JACKSONVILLE, FL 32210		CITY - ST - ZIP	7775 Herlong Rd Jacksonville, FL 32210	
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 617, 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: <i>Myra F. Simmons</i> Myra F. Simmons <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			3/24/2006 904-781-0618 <small>Date Daytime Phone #</small>		