2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002175

Entity Name: TAMPA BAY FLORIDA UNIT WBCCI, INC.

FILED Mar 16, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5681 92ND TERR PINELLAS PARK, FL 337825009 US						
Current Mailing Address:			New Maili	New Mailing Address:		
5681 92ND TERR PINELLAS PARK, FL 337825009 US						
FEI Number: 59-6212215 FEI Number Applied For ()		FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
GROENEV 5681 92ND	ELD, JACKIE I TERR	-				
	PARK, FL 337	825009 US				
The above in the State		ubmits this statement for the pur	pose of changing i	ts registered	d office or registered agent, or both,	
SIGNATURE:						
Electronic Signature of Registered Agent					Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGE	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GROENEVELD, 5681 92ND TER		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	CS () KIRCHENSTINE 4914 BRADFOR TAMPA, FL 336	D LANE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	P () KENNEY, BETTY 18137 WEBSTE HUDSON, FL 34	R GROVE DR	Title: Name: Address: City-St-Zip:		(X) Change()Addition L OY GREEN DR ENTER, FL 335738036	
Title: Name: Address: City-St-Zip:	PP () MCCOLLOUGH, 2441 SAND CRA LAKELAND, FL	INE TR	Title: Name: Address: City-St-Zip:		(X) Change () Addition ETTY STER GROVE DR L 346675598	
Title: Name: Address: City-St-Zip:	D () SMOLK, DICK 118 ROBERT JA VALRICO, FL 33		Title: Name: Address: City-St-Zip:	D EDWARDS, 1432 C.R. 5 BARTOW, F		
Title: Name: Address: City-St-Zip:	NUNN, CARL 947 VILLEROY	Delete GREEN DR	Title: Name: Address:		(X) Change () Addition DY OY GREEN DR	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACKIE GROENEVELD TREA 03/16/2007