

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 10, 2008 08:00 A**  
**Secretary of State**


**DOCUMENT # P00000077253**  
 1. Entity Name  
**WOLFF PRODUCTIONS & CONSULTING, INC.**



Principal Place of Business  
**1916 TIMARRON WAY  
 NAPLES, FL 34109**

Mailing Address  
**1916 TIMARRON WAY  
 NAPLES, FL 34109**

**DO NOT WRITE IN THIS SPACE**



03072008 No Chg-P CR2E034 (11/05)

4. FBI Number **593712313** Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent

**WOLFF, RICHARD  
 916 TIMARRON WAY  
 NAPLES, FL 34109**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2008 Fee will be \$650.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

000000852146  
 03/26/08-80016-021 150:00

**10. OFFICERS AND DIRECTORS:**

TITLE	P
NAME	WOLFF, RICHARD
STREET ADDRESS	1916 TIMARRON WAY
CITY - ST - ZIP	NAPLES, FL 34109
TITLE	VP
NAME	WOLFF, SOOK J
STREET ADDRESS	1916 TIMARRON WAY
CITY - ST - ZIP	NAPLES, FL 34109
TITLE	ST
NAME	WOLFF, RICHARD
STREET ADDRESS	1916 TIMARRON WAY
CITY - ST - ZIP	NAPLES, FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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:** *Richard Wolff*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #