2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000038249

Entity Name: WLFI HOLDINGS, INC.

City-St-Zip: BIRMINGHAM, AL 35242

City-St-Zip: MIAMI, FL 33133

() Delete

2665 SO BAYSHORE DR STE 800

KACZYNSKI, WILLIAM F

Title:

Name:

Address:

FILED Feb 14, 2003 Secretary of State

Current P	rincipal Place	of Business:	New Prir	New Principal Place of Business:			
2665 S BA MIAMI, FL	YSHORE DRI\ 33133	/E STE 800					
Current M	ailing Addres	s:	New Mai	New Mailing Address:			
2665 S BA MIAMI, FL	YSHORE DRI\ 33133	/E STE 800					
FEI Number:	65-1091927	FEI Number Applied For()	FEI Number Not Ap	plicable ()	Certificate of Status Desired	()	
Name and	Address of C	urrent Registered Agent:	Name an	d Address of	New Registered Agent:		
CALLEJAS, MARIA C 2665 S BAYSHORE DRIVE STE 800 MIAMI, FL 33133				GERSHMAN, DAVID 2665 S BAYSHORE DRIVE STE 800 MIAMI, FL 33133			
	named entity s e of Florida.	submits this statement for the	purpose of changing	ı its registered	l office or registered agent, o	r both,	
SIGNATUR	RE: DAVID GI	ERSHMAN		02/14/2003			
	Electron	ic Signature of Registered Ag	gent		Date		
	npaign Financing	g Trust Fund Contribution(). TORS:	ADDITIO	NS/CHANGE	S TO OFFICERS AND DIR	ECTORS:	
Title: Name: Address: City-St-Zip:	KUFFNER, MAF	HORE DR STE 800	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	SOLOMON, DA	EET 29TH FLR	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	VT () TORTORICI, VII 160 VILLAGE S BIRMINGHAM, A	TREET	Title: Name: Address: City-St-Zip:	TORTORICI, 1801 N ANDF	(X) Change()Addition VINCENT A REWS AVENUE EACH, FL 33069		
Title: Name: Address: City-St-Zip:	POWELL, EARI	HORE DR STE 800	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address:	DP () TESNEY, BOBE 160 VILLAGE S		Title: Name: Address:	ALBERTSON	(X) Change()Addition I, BRUCE REWS AVENUE		

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.

Title:

Name: Address:

City-St-Zip:

City-St-Zip: POMPANO BEACH, FL 33069

KOEHN, ROBERT

MIAMI, FL 33133

(X) Change () Addition

2665 SO BAYSHORE DR STE 800

SIGNATURE: MARILYN D. KUFFNER S 02/14/2003

JAMES D. CARREKER, DIRECTOR JDC HOLDINGS 2100 MCKINNEY, SUITE 1460 DALLAS, TEXAS 75201

MICHAEL J. FOURTICQ, SR., DIRECTOR HANCOCK PARK ASSOCIATES 10323 SANTA MONICA BOULEVARD, SUITE 101 LOS ANGELES, CA 90025

RICHARD A. MERINGOLO, DIRECTOR BANC BOSTON MAIL STOP: MA DE 10210A 175 FEDERAL STREET, 10TH FLR BOSTON, MA 02110

WALTER J. OLSON, III, DIRECTOR SOUTHERN FARM BUREAU LIFE INSURANCE COMP 1401 LIVINGSTON LANE JACKSON, MS 39213

DEREK A. MCDOWELL DIRECTOR 2665 SO BAYSHORE DR STE 800 MIAMI, FL 33133