


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000059964
1. Entity Name
WGCC, INC.



Principal Place of Business
300 SE 2ND ST.
FT. LAUDERDALE, FL 33301

Mailing Address
300 SE 2ND ST.
FT. LAUDERDALE, FL 33301



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1126947

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
JONES, PATRICIA
300 SE 2ND ST.
FT. LAUDERDALE, FL 33301

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 re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

00000507125
04/27/06 80052-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	STILES, TERRY W
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	VT
NAME	EAGON, DOUGLAS P
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	VS
NAME	JONES, PATRICIA
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	V
NAME	PALMER, STEPHEN R
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	V
NAME	STINE, JAMES W
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301
TITLE	V
NAME	FERRERA, ROCCO
STREET ADDRESS	300 SE 2ND ST.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301

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: Terry W. Stiles Terry W. Stiles 3/10/06 954-627-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #