

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000102224

1. Entity Name
WORLD CLASS PROFESSIONALS, INC.



Principal Place of Business
1236 COOPER DRIVE
NAPLES, FL 34103

Mailing Address
1236 COOPER DRIVE
NAPLES, FL 34103

FILED

04 SEP 17 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/16/04 90013002 158.75



09152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1148152

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RALPH, GARY A
4532 EAST TAMIAMI TRAIL
SUITE 201
NAPLES, FL 34112

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT MCARDLE, TRACY L 1236 COOPER DRIVE NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS MCARDLE, JOHN T 1236 COOPER DRIVE NAPLES, FL 34103
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IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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

Tracy L. McCardle TRACY L. MCARDLE

9/15/04

239-649-1055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PS 212

1236 Cooper Drive
Naples, FL 34103
(239) 649-1055
(239) 649-7465 (Fax)
License # 24727

World Class Professionals, Inc.

September 15, 2004

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



RE: 2004 Annual Report - Document #P01000102224

To Whom It May Concern:

We had previously sent a letter requesting a waiver of the \$400 late fee as we did *not* receive the first notice for the annual report. We only received the second notice, the notice of dissolution.

We already sent a check for \$158.75 (\$8.75 for the certificate) and it has been cashed. Therefore, I assumed the matter was resolved.

We then received a letter stating that it was not accepted. I spoke with a representative this morning and she said to send another letter with the annual report form re-stating that we did not receive the first notice.

Thank you in advance and we appreciate your understanding in this matter.

Sincerely,

Tracy L. McArdle
President/Owner