

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000032380

Entity Name: WV CAPITAL HOLDINGS, INC.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

%CLOCKWORK, 2 NORTH TAMIAMI TRAIL
SUITE 506
SARASOTA, FL 34236

Current Mailing Address:

%CLOCKWORK, 2 NORTH TAMIAMI TRAIL
SUITE 506
SARASOTA, FL 34236

New Principal Place of Business:

%CLOCKWORK, PLAZA FIVE POINTS
50 CENTRAL AVENUE, SUITE 920
SARASOTA, FL 34236

New Mailing Address:

%CLOCKWORK, PLAZA FIVE POINTS
50 CENTRAL AVENUE, SUITE 920
SARASOTA, FL 34236

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ABRAMS, JAMES D
Address: 2 NORTH TAMIAMI TRAIL SUITE 506
City-St-Zip: SARASOTA, FL 34236

Title: P () Delete
Name: ABRAMS, JAMES D
Address: 2 NORTH TAMIAMI TRAIL, SUITE 506
City-St-Zip: SARASOTA, FL 34236

Title: S () Delete
Name: BECKMANN, ROBERT F
Address: 2 NORTH TAMIAMI TRAIL SUITE 506
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: MYERS, PATRICIA A
Address: 7777 BONHOMME AVENUE, SUITE 1800
City-St-Zip: CLAYTON, MO 63105

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ABRAMS, JAMES D
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

Title: P (X) Change () Addition
Name: ABRAMS, JAMES D
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

Title: S (X) Change () Addition
Name: BECKMANN, ROBERT F
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

Title: T (X) Change () Addition
Name: MYERS, PATRICIA A
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

Title: CFO () Change (X) Addition
Name: MCCANE, KERRY D
Address: 50 CENTRAL AVENUE, SUITE 920
City-St-Zip: SARASOTA, FL 34236

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT F. BECKMANN

SEC

04/18/2007

Electronic Signature of Signing Officer or Director

Date