

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000101289

Entity Name: WCS EXCHANGE, INC.

FILED  
Jan 03, 2005  
Secretary of State

## Current Principal Place of Business:

900 SIXTH AVENUE SOUTH  
SUITE 203  
NAPLES, FL 34102

## New Principal Place of Business:

## Current Mailing Address:

900 SIXTH AVENUE SOUTH  
SUITE 203  
NAPLES, FL 34102

## New Mailing Address:

FEI Number: 56-2409436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHWEIKHARDT, WILLIAM  
900 SIXTH AVENUE SOUTH  
SUITE 203  
NAPLES, FL 34102 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: P ( ) Delete  
Name: SCHNEIRHARDT, KATHERINE A  
Address: 900 SIXTH AVE S STE 203  
City-St-Zip: NAPLES, FL 34102

Title: VP ( ) Delete  
Name: JEPSON, BENJAMIN  
Address: 900 SIXTH AVE S STE 203  
City-St-Zip: NAPLES, FL 34102

Title: S ( ) Delete  
Name: SCHWEIRHARDT, WILLIAM  
Address: 900 SIXTH AVE S STE 203  
City-St-Zip: NAPLES, FL 34102

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SCHWEIKHARDT, KATHERINE A  
Address: 900 SIXTH AVE S STE 203  
City-St-Zip: NAPLES, FL 34102

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SCHWEIKHARDT, WILLIAM  
Address: 900 SIXTH AVE S STE 203  
City-St-Zip: NAPLES, FL 34102

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.

SIGNATURE: KATHERINE SCHWEIKHARDT

P

01/03/2005

Electronic Signature of Signing Officer or Director

Date