


2005 FOR PROFIT CORPORATION ANNUAL REPORT

PAGE 1 of 2

DOCUMENT # P04000059869		
1. Entity Name WCS MORTGAGE COMPANY, INC.		

FILED

05 DEC 27 AM 11:33

Principal Place of Business 1091 SOUTHEAST 59TH STREET OCALA, FL 34480	Mailing Address 1091 SOUTHEAST 59TH STREET OCALA, FL 34480
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01/24/05 90048 039 18.000



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01192005 Chg-P CR2E034 (10/03)

4. FEI Number 20-0956997	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
BASURTO, MARK A 220 S. FRANKLIN STREET TAMPA, FL 33602	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Schettine, William C 1091 SE 59th St. Ocala, FL 34480 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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B 12/29/05

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: W.C. Schettine William C. Schettine 01/19/05 352-369-1900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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WCS Mortgage Company, Inc.
1091 Southeast 59th Street
Ocala, FL 34480
December 21, 2005

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: 2005 Annual Report
Document Number P04000059869

To Whom It May Concern:

On January 19, 2005 we filed our 2005 Corporate Annual Report and sent check number 2197 for \$150.00 for the filing fee. However we just received a notice of dissolution or revocation and a phone call to your office informed us that we had failed to include the title of William C. Schettine, an officer of the corporation.

Enclosed please find a corrected copy of the annual report. We request that any late fees and penalties be waived because we did not know that there was a problem until now.

Please contact me at 716-358-2915 if you should have any questions. Thank you.

Sincerely,



Heather A. Meyers
Administration

Enc.