

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000051797

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** WEALTH MANAGEMENT PARTNERS, INC.

**Current Principal Place of Business:**

4101 CORAL TREE CIRCLE  
313  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

4101 CORAL TREE CIRCLE  
313  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 20-8942864

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SACCO, MICHAEL A  
4101 CORAL TREE CIRCLE  
#313  
COCONUT CREEK, FL 33073 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SACCO, MICHAEL A  
**Address:** 4101 CORAL TREE CIRCLE #313  
**City-St-Zip:** COCONUT CREEK, FL 33073 US

I hereby 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 all other like empowered.

**SIGNATURE:** MICHAEL A. SACCO

P

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date