

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000012617

Entity Name: WOLF WPC INCORPORATED

FILED  
Feb 25, 2009  
Secretary of State

## Current Principal Place of Business:

3047 -4 ST. JOHNS BLUFF ROAD SOUTH  
JACKSONVILLE, FL 32246 US

## New Principal Place of Business:

## Current Mailing Address:

1450 FIFTH STREET WEST  
NORTH CHARLESTON, SC 29405 US

## New Mailing Address:

FEI Number: 59-3163947

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, JAMES H  
3047-4 ST. JOHNS BLUFF RD. S.  
JACKSONVILLE, FL 32246 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: WRIGHT, WILLIAM B  
Address: 512 COMMONWEALTH ROAD  
City-St-Zip: MOUNT PLEASANT, SC 29466 US

Title: P ( ) Delete  
Name: CHRISTOPHER, WILLIAM R  
Address: 1235 FIFTEEN MILE LANDING  
City-St-Zip: AWENDAW, SC 29429 US

Title: S ( ) Delete  
Name: ANDERSON, WILLIAM S  
Address: 5 BRIGANTINE COURT  
City-St-Zip: SAVANNAH, GA 31410 US

Title: T ( ) Delete  
Name: JOHNSON, JAMES H  
Address: 3047-4 ST. JOHNS BLUFF ROAD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: V ( ) Delete  
Name: LIN, GUOMING  
Address: 211 LYMAN HALL ROAD  
City-St-Zip: SAVANNAH, GA 31410 US

Title: D ( ) Delete  
Name: LIPKA, DAVID S  
Address: 325 QUILL LANE  
City-St-Zip: MATTHEWS, NC 28105 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JAMES H. JOHNSON III

CFO

02/25/2009

Electronic Signature of Signing Officer or Director

Date