

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084830

Entity Name: WMSU, INC.

FILED  
Jan 11, 2004  
Secretary of State

## Current Principal Place of Business:

23100 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32407 US

## New Principal Place of Business:

## Current Mailing Address:

101 DURANGO ROAD  
DESTIN, FL 32541

## New Mailing Address:

FEI Number: 59-3350143      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WORK, GARY  
1940 ST. MARY AVENUE  
PENSACOLA, FL 32501 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: WYLLIE, WILLIAM P III  
Address: 101 DURANGO ROAD  
City-St-Zip: DESTIN, FL 32541

Title: D ( ) Delete  
Name: WYLLIE, JANIE M  
Address: 101 DURANGO ROAD  
City-St-Zip: DESTIN, FL 32541

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: WILLIAM P WYLLIE III

PRES

01/11/2004

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

\_\_\_\_\_  
Date