


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000086355	
1. Entity Name WLM & ASSOCIATES, INC.	

Principal Place of Business	Mailing Address
7780 SW 117TH AVE S103 MIAMI, FL 33183	7780 SW 117TH AVE S103 MIAMI, FL 33183 US



04122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0630152	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
DEARR, CRAIG R 9130 S. DADELAND BLVD #1609 MIAMI, FL 33156

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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 _____
Signature, typed or printed name of registered agent and title if applicable.		

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	U000000325288 04/23/05-80009-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	MICKEY, WILLIAM L
STREET ADDRESS	7780 SW 117TH AVE - STE 103
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	D
NAME	MICKEY, WILLIAM L JR
STREET ADDRESS	7780 SW 117TH AVE - STE 103
CITY-ST-ZIP	MIAMI, FL 33183
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: <u>William Mickey</u>	4/14/05	305-598-4784
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		
Date	Daytime Phone #	