

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000084472

1. Entity Name

WCC/FL/02, INC.

FILED

Apr 17, 2001 8:00 am  
Secretary of State

04-17-2001 90029 036 \*\*\*150.00

Principal Place of Business

Mailing Address

4200 WACKENHUT DRIVE #100  
PALM BEACH GARDENS FL 33410-4243

4200 WACKENHUT DRIVE #100  
PALM BEACH GARDENS FL 33410-4243

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0785293

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOWARD, TIMOTHY J  
4200 WACKENHUT DRIVE, #100  
PALM BEACH GARDENS FL 33410-4243

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC ☐ Delete  
NAME WACKENHUT, RICHARD R  
STREET ADDRESS 135 S RIVER RD  
CITY-ST-ZIP STUART FL 34996

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DP ☐ Delete  
NAME ZOLEY, GEORGE C  
STREET ADDRESS 4 CAYUGA LN  
CITY-ST-ZIP SEA RANCH LAKES FL 33308

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DV ☐ Delete  
NAME CALABRESE, WAYNE H  
STREET ADDRESS 123 OCEAN KEY WY  
CITY-ST-ZIP JUPITER FL 33477

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME GREEN, IAN  
STREET ADDRESS 12764 NW 15 ST  
CITY-ST-ZIP SUNRISE FL 33323

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IAN GREEN

V.P., TAX

Date

4/5/01

Daytime Phone #

(561) 622-5656

CR2E034 (10/00)