

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000094345

1. Entity Name
WORLD CLASS MANAGEMENT, INC.



Principal Place of Business
1025 S ATLANTIC AVE
DAYTONA BEACH, FL 32118

Mailing Address
1025 S ATLANTIC AVE
DAYTONA BEACH, FL 32118

FILED

06 MAY -1 PM 3:47

SECRET
TALLAHASSEE, FLORIDA



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3502873

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HEY, W. ROBERT
1025 SO ATLANTIC AVE
DAYTONA BEACH, FL 32118

DO NOT WRITE
IN THIS SPACE

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME FISKE, MARIE
STREET ADDRESS 1025 S ATLANTIC AVE
CITY-ST-ZIP DAYTONA BEACH, FL 32118

TITLE D
NAME LABOSCO, CHERYL
STREET ADDRESS 1025 S ATLANTIC AVE
CITY-ST-ZIP DAYTONA BEACH, FL 32118

TITLE D
NAME HEY, W R
STREET ADDRESS 1025 S ATLANTIC AVE
CITY-ST-ZIP DAYTONA BEACH, FL 32118

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

500074513595
05/12/06--01025--006 **1772.50

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert Hey ROBERT HEY 4/28/06 386-252-9681