

P98000006206

FLORIDA FILING & SEARCH SERVICES, INC.
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FILED
2001 DEC 20 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DATE: 12-20-01

NAME: W.C.C. & ASSOCIATES, INC.

TYPE OF FILING: CHANGE OF REG. AGENT

COST:

RETURN:

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Paul D. Hodge

C. Coulliette DEC 20 2001

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : W.C.C. & Associates, Inc.

2. The mailing address of the corporation : 12180 Greenspoint Drive, #326,
Houston, TX 77060

3. Date of incorporation/qualification: 01/21/98 Document number: P98000006206

✓ 4. The name and address of the current registered agent and office:

Lawrence Virconti
853 Vanderbilt Beach Rd. PMB#277
Naples, FL 34108

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)

Registered Agents Legal Services, Inc.
1333 North Duval Street
Tallahassee, FL 32302

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The street address of its registered office and the street address of the business office of its registered
agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board.

✓ Shelly Cochran
(Signature of an officer, chairman or vice chairman of the board)

✓ 12/13/01
(Date)

✓ Shelly Cochran, President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated
corporation, I hereby accept the appointment as registered agent and agree to act in this capacity.
I further agree to comply with the provisions of all statutes relative to the proper and complete
performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent.

Michael W. Ashley
(Signature of Registered Agent)

12/19/01
(Date)

If signing on behalf of an entity:

Michael W. Ashley V.P.
(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***