FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P980000930951 1. Corporation Name

W.C.R.P., INC.

Principal Place of Business Summit Center, Ste 144 13575 58th Street North

Mailing Address Summit Center, Ste.144 13575 58th Street North

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90093 047 ***150.00

13373 30th Defect Noten 133) JOCH DOLCO N	01 011		
Clearwater FL 33760 Clear	arwater FL 33760	DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
		3. Date Incorporated or Qualifed	·	
		11/03/1998		
2. Principal Place of Business 2a. Ma	niling Address	4. FEI Number	Applied For	
21	-	59-3564873	Not Applicable	
	ite, Apt. #, etc.	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State Cit	y & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country Zip	Country	8. This corporation owes the current year I	ntangible	
24 25 29	30	Personal Property Tax.	☐ Yes ☐ No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registere	10. Name and Address of New Registered Agent	
Grimes, Caleb J. 1023 Manatee Avenue West Bradenton FL 34205 US		ame		
		reet Address (P.O. Box Number is Not Acceptable)		
			·	
	84 Cit	F	85 Zip Code	
 Pursuant to the provisions of Sections 607.0502 and 607.1 office or registered agent, or both, in the State of Florida. S agent. I am familiar with, and accept the obligations of, Set 	such change was authorized by the o	med corporation submits this statement for the purpose of corporation's board of directors. I hereby accept the appropriate the corporation of the purpose of the corporation of the cor	of changing its registered bintment as registered	

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. □ DELETE ☐ Addition Change TITLE 1.1 TITLE PD NAME Bradford, Dennis D. 1.3 STREET ADDRESS STREET ADDRESS 13575 58th Street North CITY-ST-ZIP <u>earwater FL 33760</u> 1.4 CITY-ST-ZIP DELETE Addition 21 TITLE ☐ Change TITLE Ľübeck, Daniel E. NAME 2.2 NAME 13575 58th Street North STREET ADDRESS 2.3 STREET ADDRESS Clearwater FL 33760 CITY-ST-ZIP 2.4 CITY-ST-ZIP STD □ DELETE 3.1 TITLE Change Addition TITLE Lubeck, Joseph G. 3.2 NAME NAME 13575 58th Street North STREET ADDRESS 3.3 STREET ADDRESS Clearwater FL 33760 CITY-ST-ZIP 3.4. CITY-ST-ZIP □ DELETE Change Addition TITLE 41 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dennis D. Bradford EO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99

727-538-7706 Daytime Phone #

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CR2E034 (11/98)