## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P98000097478** SELLEMAN OF STATE TALLAHASSEE, FLORIDA 1. Entity Name WDRG, INC. **RE400004** Mailing Address Principal Place of Business 120 GLENWOOD AVENUE SOUTH 120 GLENWOOD AVENUE SOUTH CLEARWATER, FL 33755 CLEARWATER, FL 33755 01013 004 \$150,00 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01172004 Chg-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 59-3542833 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Alton K. Cates Jr. HANCOCK, FRANK J Street Address (P.O. Box Number is Not Acceptable) 2111 DREW STREET CLEARWATER, FL 33765 13200 McCornick Dr. City Tampa 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. Man L 1-31-04 SIGNATURE. Signature, typed of printed ha DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Dolete TITLE ☐ Change ☐ Addition TITLE WEAVER, CHARLES C NAME NAME STREET ADDRESS 120 GLENWOOD AVENUE SOUTH STREET ADDRESS CLEARWATER, FL 33755 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE nns ☐ Dolete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP □ Deleta TITO F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-ZIP CITY-\$1-719 TITLE Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-SI-7IP CITY-\$1-ZIP TITLE ☐ Delete TITLE ☐ Addition Change MARKE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition Delcte NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP 12. 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 10 or Block 11 if Mes. 727-443-4290 SIGNATURE:

OL FEB 10 AM 11:28

## Affactment (66400694

January 31, 2004

Florida Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

This account should have a credit balance. Thus, there is no check enclosed. If your records do not indicate a credit balance, I would appreciate a timely acknowledgement in order to get the matter resolved prior to May 1, 2004.

Respectfully,

Clark Weaver President

P98000097478