2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# S55049

Entity Name: WSC CONSULTING, INC.

Current Principal Place of Business:

3442 MANILLA DR
SPRING HILL, FL 346071015 US

New Principal Place of Business:

3442 MANILLA DR
WEEKI WACHEE, FL 346071015 US

Current Mailing Address:

3442 MANILLA DR
SPRING HILL, FL 346071015 US

New Mailing Address:

3442 MANILLA DR
WEEKI WACHEE, FL 346071015 US

FEI Number: 59-3069924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COPE, WILLIAM S
3442 MANILLA DR
SPRING HILL, FL 34607 US

Name and Address of New Registered Agent:

COPE, WILLIAM S
3442 MANILLA DR
WEEKI WACHEE, FL 34607 US

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: WILLIAM S. COPE 04/18/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COPE, WILLIAM S
Address: 3442 MANILLA DR
City-St-Zip: SPRING HILL, FL

Title: D ( ) Delete
Name: DOUGHERTY, JOHN A
Address: 12122 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 34613

Title: D ( ) Delete
Name: COPE, AARON S
Address: 260 SAN JOSE AVE, APT.# 203
City-St-Zip: SAN FRANCISCO, CA 94110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COPE, WILLIAM S
Address: 3442 MANILLA DR
City-St-Zip: WEEKI WACHEE, FL 346071015

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM S. COPE D 04/18/2007
Electronic Signature of Signing Officer or Director Date