

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55049

Entity Name: WSC CONSULTING, INC.

FILED  
Apr 13, 2008  
Secretary of State

**Current Principal Place of Business:**

3442 MANILLA DR  
WEEKI WACHEE, FL 346071015 US

**New Principal Place of Business:**

**Current Mailing Address:**

3442 MANILLA DR  
WEEKI WACHEE, FL 346071015 US

**New Mailing Address:**

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  
WEEKI WACHEE, FL 34607 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

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: WEEKI WACHEE, FL 346071015

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

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 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

PRES

04/13/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date