2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S57610

Entity Name: WESCO SERVICES INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

619 N TAMIAMI TRAIL 3135 BOBCAT VILLAGE CTR RD NOKOMIS, FL 34275 NORTH PORT, FL 34288 US

Current Mailing Address: New Mailing Address:

619 N TAMIAMI TRAIL

NOKOMIS, FL 34275

3135 BOBCAT VILLAGE CTR RD

NORTH PORT, FL 34288 US

FEI Number: 65-0270822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CISERELLA, JOHN C.
619 N TAMIAMI TRAIL
N, FL 34275 US

CISERELLA, JOHN C
3135 BOBCAT VILLAGE CTR RD
NORTH PORT, FL 34288 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: JOHN C CISERELLA 04/17/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CISERELLA, JOHN C., CISERELLA, JOHN C., Name: Name: 619 N TAMIAMI TRAIL 13548 WAINWRIGHT AVE Address: Address: NOKOMIS, FL 34275 City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: EVP () Delete Title: EVP (X) Change () Addition Name: CISERELLA, JOHN III, Name: CISERELLA, JOHN C III

 Address:
 619 N TAMIAMI TRAIL
 Address:
 13548 WAINWRIGHT AVE

 City-St-Zip:
 NOKOMIS, FL 34275
 City-St-Zip:
 PORT CHARLOTTE, FL 33953 US

Title: S () Delete Title: S (X) Change () Addition Name: DAVIDSON, LESLIE A., Name: DAVIDSON, LESLIE A

Name: DAVIDSON, LESUIE A.,
Address: 619 N TAMIAMI TRAIL
City-St-Zip: NOKOMIS, FL 34275
Address: DAVIDSON, LESUIE A
Address: 1490 CARSWELL STREET
City-St-Zip: PORT CHARLOTTE, FL 33953 US

 Name:
 CISERALLA, JOHN,
 Name:
 CISERELLA, JOHN C

 Address:
 619 N TAMIAMI TRAIL
 Address:
 13548 WAINWRIGHT AVE

 City-St-Zip:
 NOKOMIS, FL 34275
 City-St-Zip:
 PORT CHARLOTTE, FL 33953 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 DAVIDSON, LESLIE A
 Name:
 DAVIDSON, LESLIE A

 Address:
 619 N TAMIAMI TRAIL
 Address:
 1490 CARSWELL STREET

 City-St-Zip:
 NOKOMIS, FL 34275
 City-St-Zip:
 PORT CHARLOTTE, FL 33953 US

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: LESLIE DAVIDSON VP 04/17/2008