

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000018242

**Entity Name:** WAC OF FT. LAUDERDALE, INC.

**Current Principal Place of Business:**

1415 WEST CYPRESS CREEK RD.  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

1415 WEST CYPRESS CREEK RD.  
FT. LAUDERDALE, FL 33309

**FEI Number:** 65-0740689

**Certificate of Status Desired:** No

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

POSNER, MICHAEL JESQ  
4420 BEACON CIRCLE  
SUITE 100  
WEST PALM BEACH, FL 33407 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ALTSCHUL, KEN  
Address 16 VERONA COURT  
City-State-Zip: NEW CITY NY 10956

Title S  
Name ALTSCHUL, GARY  
Address 1415 W. CYPRESS CREEK RD.  
City-State-Zip: FT. LAUDERDALE FL 33309

Title T  
Name ALTSCHUL, GARY  
Address 1415 W. CYPRESS CREEK RD.  
City-State-Zip: FT. LAUDERDALE FL 33309

*I hereby 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 all other like empowered.*

**SIGNATURE:** GARY ALTSCHUL

**SECRETARY**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date