

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 03, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # F03000001763  
 1. Entity Name  
 WCI GLOBAL BUSINESS SERVICES INC.



Principal Place of Business  
 3400 RIVERSIDE DR., STE. 550  
 BURBANK, CA 91505

Mailing Address  
 C/O JULIE SPENCER  
 4000 WARNER BLVD.  
 BURBANK, CA 91522



01092006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
 51-0451723

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

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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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARPUR, REGINALD G 4000 WARNER BLVD. BURBANK, CA 91522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAUER, JOHN 4000 WARNER BLVD. BURBANK, CA 91522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KARICKHOFF, BRENDA C ONE TIME WARNER CENTER NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THERRIEN, JOHN 4000 WARNER BLVD. BURBANK, CA 91522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CHAPMAN, K. LEIGH 4000 WARNER BLVD. BURBANK, CA 91522
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SPENCER, JULIE F 4000 WARNER BLVD. BURBANK, CA 91522

100000419477  
 02/15/06-80009-001 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other files empowered.

SIGNATURE: Julie F. Spencer JULIE F. SPENCER, Asst. Sec. 1/25/06 (818)95  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dyingline Phone #