


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # F03000001763 1. Entity Name WCI GLOBAL BUSINESS SERVICES INC.	
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Principal Place of Business 3400 RIVERSIDE DR., STE. 550 BURBANK, CA 91505	Mailing Address C/O JULIE SPENCER 4000 WARNER BLVD. BURBANK, CA 91522
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0451723	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$850.00

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

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U00000592351
01/19/07-80058-021 150.00

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 like empowered.

SIGNATURE: Julie F. Spencer, Asst. Secretary Julie F. Spencer (86)
954-7151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #