V#610306 Ant \$150.00

2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Aug 12, 2008 8:00 am Secretary of State DOCUMENT # S86621 08-12-2008 90024 013 ***150.00 1. Entity Name WESTERN MANAGEMENT SERVICES, INC. Principal Place of Business Mailing Address 3500 150.00 3850 OAKS CLUBHOUSE DR #101 P 0 BOX 1407 POMPANO BEACH, FL 33069 FINDLAY, OH 45839 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02052008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 58-1969069 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PALENSKE, BRUCE Street Address (P.O. Box Number is Not Acceptable) 3850 OAKS CLUBHOUSE DR #101 POMPANO BEACH,, FL 33069 City Zip Code 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete TITLE Change ☐ Addition 7446 N. Tall Oaks Circle Park City, Ut. 84098 NAME PALENSKE, BRUCE O. NAME 3860 BAKS CLUBHOUSE DR #401 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33009-CITY-ST-ZIP VD. TITLE ☐ Delete TITLE Addition KRONBERG, C. JOHN NAME NAME STREET ADDRESS 7101 CAPRI LANE STREET ADDRESS CITY-ST-ZIP PINELAND, FL 33945 CITY-ST-2IP STD ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME SABADOS, RICHARD J. NAME STREET ADDRESS 11351 PEARL ROAD STREET ADDRESS STRONGSVILLE, OH CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TIFLE NAME NAME STREET ADDRESS STREET ADDRESS

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 likes impowered.

CITY-ST-ZIP

SIGNATURE: _

NG OFFICER OR DIRECTOR

FILED

ATTACHMENT 40113288

Western Management Services, Inc. P O Box 1407 Findlay, Ohio

August 7, 2008

Florida Department of State Secretary of State Division of Corporations P O Box 8700 Tallahassee, FL 32314

RE: Document #S86621
Western Management Services, Inc.

To Whom It May Concern:

We have received your Notice of Intent to Dissolve for failing to file the 2008 For Profit Corporation Annual Report for the above referenced entity.

The report was in fact filed and the \$150 paid by check #610306 on February 8, 2008.

As the check is outstanding I am reissuing payment along with a copy of the report resigned by C John Kronberg, Vice-President.

Kindly reinstate Western Management Services, Inc.

Thank you,

Noni Rhodes Treasurer

Enclosure