

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90023 040 ***150.00

DOCUMENT # 479360

1. Entity Name

WES INVEST, INC.



Principal Place of Business

1350 ORANGE AVENUE
#247
WINTER PARK FL 32789
US

Mailing Address

1350 ORANGE AVENUE
#247
WINTER PARK FL 32789
US



2. Principal Place of Business - No P.O. Box #

1469 N. New York St.

3. Mailing Address

1469 N. New York St.

Suite, Apt., etc.

Suite, Apt., etc.

1st MOORE

CR2E034 (10/07)

City & State

Sanford FL

City & State

Sanford FL

4. FEI Number

59-1602714

Applied For

Not Applicable

Zip

32771

Country

USA

Zip

32771

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WESLEY, JAMES A.
1350 ORANGE AVENUE
#247
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME WESLEY, JAMES A.
STREET ADDRESS 5612 SAND CRANE COVE
CITY-ST-ZIP OVIEDOO FL 32765

TITLE VPD ☐ Delete
NAME WESLEY, RICHARD E.
STREET ADDRESS 1831 RED WOOD TERR GROVE
CITY-ST-ZIP LAKE MARY FL 32746

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Richard E. Wesley VPD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/08 (407) 321-214-4366
DATE DAYTIME PHONE #