

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 835071

FILED  
Apr 23, 2012  
Secretary of State

**Entity Name:** WELDON, WILLIAMS & LICK

**Current Principal Place of Business:**

711 NORTH A STREET  
FORT SMITH, AR 72901

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 168  
FORT SMITH, AR 72902

**New Mailing Address:**

**FEI Number:** 71-0188290

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: WALCOTT, JAMES D JR  
Address: 711 NORTH A STREET  
City-St-Zip: FORT SMITH, AR

Title: VP  
Name: HENDRICKS, ANDREW B  
Address: 711 NORTH A STREET  
City-St-Zip: FORT SMITH, AR 72901

Title: ST  
Name: GEREN, TRACEY S  
Address: 711 NORTH A STREET  
City-St-Zip: FORT SMITH, AR 72901

Title: D  
Name: FLANDERS, DUDLEY  
Address: 1901 WHEELER AVE.  
City-St-Zip: FORT SMITH, AR 72901

Title: D  
Name: ALSUP, WILLIAM E JR.  
Address: 93 RIO GRANDE DRIVE  
City-St-Zip: DURANGO, CO 81301

Title: D  
Name: KNIGHT, ELLEN J  
Address: 5800 RATTLESNAKE DRIVE  
City-St-Zip: MISSOULA, MT 59802

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: TRACEY S. GEREN

CFO

04/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date