

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006559

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: WESTERN SIERRA ACCEPTANCE CORPORATION

**Current Principal Place of Business:**

1547 PALOS VERDES #264  
WALNUT CREEK, CA 94597 US

**New Principal Place of Business:**

**Current Mailing Address:**

1547 PALOS VERDES #264  
WALNUT CREEK, CA 94597 US

**New Mailing Address:**

FEI Number: 68-0442061      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BUSINESS FILINGS, INC.  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RIDLEY, DANIEL  
Address: 1547 PALOS VERDES #264  
City-St-Zip: WALNUT CREEK, CA 94597

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T ( ) Change (X) Addition  
Name: MOORE, SHERRY  
Address: 1547 PALOS VERDES #264  
City-St-Zip: WALNUT CREEK, CA 94597

Title: S ( ) Change (X) Addition  
Name: MASCOTT, OWEN  
Address: 1547 PALOS VERDES #264  
City-St-Zip: WALNUT CREEK, CA 94597

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHERRY MOORE

T

04/14/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date