## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000001573

Entity Name: WESTERN FUNDING INCORPORATED

FILED Apr 23, 2009 Secretary of State

Date

Current Pr	incipal Place of	f Business:	New Principal Place	New Principal Place of Business:		
324 N. DALE MABRY HWY TAMPA, FL 33609			324 N. DALE MABRY #302 TAMPA, FL 33609	··		
Current Ma	ailing Address:		New Mailing Addres	New Mailing Address:		
	TRICK LANE S, NV 89120					
FEI Number:	95-2398043	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US						
The above in the State		omits this statement for the pur	pose of changing its register	ed office or registered agent, or both,		
SIGNATUR	!E:					
	Electronic	Signature of Registered Agent		Date		
Election Cam	paign Financing T	rust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CV () De KROCHTA, BARBA 3915 E PATRICK L LAS VEGAS, NV 8	ARA _ANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DAS () De COPE, IRENE R 3915 E PATRICK L LAS VEGAS, NV 8	_ANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DST () De KELLER, LESTER 3915 E PATRICK I LAS VEGAS, NV 8	A _ANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	V () De PECK, WALTER R 3915 E. PATRICK LAS VEGAS, NV 8	IJR. LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	DP ( ) De COPE, DWIGHT E 3915 E. PATRICK LAS VEGAS, NV 8	LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () De MERRELL, ADRIA 3915 E. PATRICK LAS VEGAS, NV 8	NNA LANE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Statutes. It	further certify tha	it the information indicated on t	his report or supplemental re	ption stated in Chapter 119, Florida port is true and accurate and that my 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: LESTER A. KELLER

DST

04/23/2009

Electronic Signature of Signing Officer or Director

"Florida Department of State Annual Report Addendum F3000001573 Western Funding Incorporated

Fax to

850-248-6017 after filing has been posted Fax did not work, so it was mailed.

Additional Directors and Officers that could NOT be input into the on-line filling.

D	Donnella M. Cope	3915 E. Patrick Lane, Las Vegas, NV 89120
D	James A. Hall	3915 E. Patrick Lane, Las Vegas, NV 89120
V	Gary C. Shannon	3915 E. Patrick Lane, Las Vegas, NV 89120
V	Donald R. Robertson	3915 E. Patrick Lane, Las Vegas, NV 89120

D = Director

V = Vice Presidnet