2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001657

FILED Apr 26, 2006 Secretary of State

Entity Na	ame: PACWES	ST FUNDING, INCORPORATE	ED .		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
SUITE 25	H POINTE DRIV 50 DREST, CA 926				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
ATTN: CHRISTOPHER SAMUELSON 2 SOUTH POINTE DR, STE 250 LAKE FOREST, CA 92630			2 SOUTH POINTE DR,	ATTN: WILLIAM JACKSON 2 SOUTH POINTE DR, STE 250 LAKE FOREST, CA 92630	
FEI Numbe	er: 06-1702217	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
1333 N. [ERED AGENT S DUVAL STREET ASSEE, FL 323				
	ve named entity ate of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	JRE:				
	Electror	nic Signature of Registered Age	ent	Date	
Election C	ampaign Financin	g Trust Fund Contribution ().			
OFFICE	RS AND DIREC	TORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P () JACKSON, WIL) Delete LIAM BURTON		(X) Change()Addition /ILLIAM BURTON	

Address: 18582 BEACH BLVD STE 18 Address: 2 SOUTH POINTE DR., STE 250 City-St-Zip: HUNTINGTON BEACH, CA 92648 City-St-Zip: LAKE FOREST, CA 92630 US Title: () Delete Title: (X) Change () Addition Name:

SAMUELSON, CHRISTOPHER L MELONE, CURTIS JAMES Name: Address: 18582 BEACH BLVD STE 18 Address: 2 SOUTH POINTE DR., STE 250 HUNTINGTON BEACH, CA 92648 LAKE FOREST, CA 92630 US City-St-Zip: City-St-Zip:

(X) Delete Title: Title: () Change () Addition

MELONE, CURTIS JAMES Name: 18582 BEACH BLVD STE 18 Address: City-St-Zip: HUNTINGTON BEACH, CA 92648 City-St-Zip:

Name:

Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: WILLIAM JACKSON 04/26/2006