

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002275

Entity Name: WESTLAKE VENTURES, INC.

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

15208 GULF BLVD., #407  
MADEIRA BEACH, FL 33708

## **New Principal Place of Business:**

## **Current Mailing Address:**

15208 GULF BLVD., #407  
MADEIRA BEACH, FL 33708

## **New Mailing Address:**

FEI Number: 56-2009922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRELEAVEN, CARL W.  
15208 GULF BLVD., #407  
MADEIRA BEACH, FL 33708 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: CP  
Name: TRELEAVEN, CARL W.  
Address: 15208 GULF BLVD., #407  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: S  
Name: TRELEAVEN, LINA Z.  
Address: 15208 GULF BLVD., #407  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: T  
Name: SCHULTZ, THOMAS J.  
Address: 5104 MCMURRAY CIR  
City-St-Zip: GREENSBORO, NC 27410

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: CARL W. TRELEAVEN

CEO

02/16/2011

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

\_\_\_\_\_  
Date