

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004916

FILED  
Feb 13, 2011  
Secretary of State

**Entity Name:** W-S INDUSTRIAL SERVICES, INC.

**Current Principal Place of Business:**

13667 192ND STREET  
COUNCIL BLUFF, IA 51503

**New Principal Place of Business:**

**Current Mailing Address:**

13667 192ND STREET  
COUNCIL BLUFF, IA 51503

**New Mailing Address:**

**FEI Number:** 47-0770315

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: CEO  
Name: WIESE, JOHN B  
Address: 16509 S 57TH AVE  
City-St-Zip: PAPILLION, NE 68133

Title: PD  
Name: HOLM, TROY D  
Address: 13667 192ND STREET  
City-St-Zip: COUNCIL BLUFFS, IA 51503

Title: VD  
Name: BICE, TIM  
Address: 1517 SOUTH 19TH STREET  
City-St-Zip: CLINTON, IA 52732

Title: SD  
Name: LEWIS, ANDY  
Address: 308A HWY 110 N P O BOX 1639  
City-St-Zip: WHITEHOUSE, TX 75791

Title: S  
Name: YOUNG, DUNCAN  
Address: 8742 FREDERICK STREET  
City-St-Zip: OMAHA, NE 68124

Title: TD  
Name: TOVAR, JOE  
Address: 378 N HWY 77  
City-St-Zip: ROCKDALE, TX 76567

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: TROY D HOLM

PRES

02/13/2011

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

\_\_\_\_\_  
Date