

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002803

Entity Name: WEST LOGISTICS, INC.

**FILED**  
**Jun 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

224 N HOOVER RD.  
DURHAM, NC 27703

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 21019  
DURHAM, NC 27703

**New Mailing Address:**

FEI Number: 56-2277857

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: P  
Name: WALSER, RANDY  
Address: PO BOX 21019  
City-St-Zip: DURHAM, NC 27703

Title: CEO  
Name: KINSEY, BRIAN  
Address: 6908 CHAPMAN ROAD  
City-St-Zip: LITHONIA, GA 30058

Title: CFO  
Name: LEASURE, BARBARA  
Address: 6908 CHAPMAN ROAD  
City-St-Zip: LITHONIA, GA 30058

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: BARBARA LEASURE

CFO

06/18/2012

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

\_\_\_\_\_  
Date