

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004084

FILED
Mar 19, 2009
Secretary of State

Entity Name: WESCO GAS & WELDING SUPPLY, INC.

Current Principal Place of Business:

9040 PENSACOLA BLVD
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10546
PRICHARD, AL 36610

New Mailing Address:

FEI Number: 63-0496060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, JEFFREY C
9040 PENSACOLA BLVD.
PENSACOLA, FL 32534 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: PIERCE, RONALD C
Address: 940 NO. M.L. KING DRIVE
City-St-Zip: PRICHARD, AL 36610

Title: PD () Delete
Name: MCCALL, VIRGINIA
Address: 940 ML KING DR
City-St-Zip: PRICHARD, AL 36610

Title: STD () Delete
Name: PIERCE, JEFFREY C
Address: 9040 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32534

Title: D () Delete
Name: PIERCE, GREGORY W
Address: 940 M L KING DR
City-St-Zip: PRICHARD, AL 36610

Title: D () Delete
Name: MILLER, JUDY
Address: 9040 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: VIRGINIA MCCALL

PD

03/19/2009

Electronic Signature of Signing Officer or Director

_____ Date