

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005406

FILED
Apr 13, 2006
Secretary of State

Entity Name: WESTGROUP PARTNER, INC.

Current Principal Place of Business:

225 108TH AVE NE
#300
BELLEVUE, WA 98004

New Principal Place of Business:

Current Mailing Address:

225 108TH AVE NE
#300
BELLEVUE, WA 98004

New Mailing Address:

FEI Number: 95-4110618

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLEE, PATRICK R
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

Title: CEO () Delete
Name: DONOGHUE, JOHN
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

Title: CFO () Delete
Name: BENECKE, MICHAEL
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

Title: VP () Delete
Name: VOKEY, SCOTT R
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

Title: VP () Delete
Name: COLEE, JAMES P
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

Title: VP (X) Delete
Name: PUJALET, MARC
Address: 225 108TH AVE NE, #300
City-St-Zip: BELLEVUE, WA 98004

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:

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

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.

SIGNATURE: SCOTT R. VOKEY

MR.

04/13/2006

Electronic Signature of Signing Officer or Director

Date