

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002907

FILED
Apr 26, 2006
Secretary of State

Entity Name: WEINGARTEN NOSTAT, INC.

Current Principal Place of Business:

2600 CITADEL PLAZA DR.
SUITE 300
HOUSTON, TX 77008

New Principal Place of Business:

Current Mailing Address:

2600 CITADEL PLAZA DR.
SUITE 300
HOUSTON, TX 77008

New Mailing Address:

FEI Number: 76-0252189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
1333 NORTH DUVAL ST.
TALLAHASSEE, FL 32303 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: ALEXANDER, ANDREW M
Address: 2600 CITADEL PLAZA DR.
City-St-Zip: HOUSTON, TX 77008

Title: D () Delete
Name: ALEXANDER, STANFORD
Address: 2600 CITADEL PLAZA DR.
City-St-Zip: HOUSTON, TX 77008

Title: VC () Delete
Name: DEBROVNER, MARTIN
Address: 2600 CITADEL PLAZA DR.
City-St-Zip: HOUSTON, TX 77008

Title: VPAS () Delete
Name: RICHTER, STEPHEN C
Address: 2600 CITADEL PLAZA DR.
City-St-Zip: HOUSTON, TX 77008

Title: VPAS () Delete
Name: SHAFER, JOE D
Address: 2600 CITADEL PLAZA DR
City-St-Zip: HOUSTON, TX 77008

Title: VPS () Delete
Name: DUFOUR, CANDACE
Address: 2600 CITADEL PLAZA DR.
City-St-Zip: HOUSTON, TX 77008

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: VPAT (X) Change () Addition
Name: SHAFER, JOE D
Address: 2600 CITADEL PLAZA DR
City-St-Zip: HOUSTON, TX 77008

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: JOE D. SHAFER

VPAT

04/26/2006

Electronic Signature of Signing Officer or Director

Date