

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006472

1. Entity Name
THE WESTMORELAND AGENCY, INC.



03 APR -1 AM 7:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
456 NORTH KIMBALL PLACE
BOISE ID 83704

Mailing Address
456 NORTH KIMBALL PLACE
BOISE ID 83704

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 54-1858389

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME BERSON, JORY
STREET ADDRESS 15000 CAPITAL ONE DRIVE
CITY-ST-ZIP RICHMOND VA 23238

TITLE ☐ Change ☐ Addition
NAME Please see attached rider
STREET ADDRESS for complete director & officer list.
CITY-ST-ZIP

TITLE S ☒ Delete
NAME SHUTTERLY, MICHAEL T
STREET ADDRESS 456 NORTH KIMBALL PLACE
CITY-ST-ZIP BOISE ID 83704

TITLE ☐ Change ☐ Addition
NAME 900015033679
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WEST, CATHERINE
STREET ADDRESS 11013 WEST BROAD STREET
CITY-ST-ZIP GLEN ALLEN VA 23060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME IVANOFF, KENT
STREET ADDRESS 456 NORTH KIMBALL PLACE
CITY-ST-ZIP BOISE ID 83704

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Delete
NAME BARUCH, LORI
STREET ADDRESS 456 NORTH KIMBALL PLACE
CITY-ST-ZIP BOISE ID 83704

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME GETZLOFF, CRAIG
STREET ADDRESS 456 NORTH KIMBALL PLACE
CITY-ST-ZIP BOISE ID 83704

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Lori Baruch*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 27, 2003 (703) 720-2280
Date Daytime Phone #

CR2E034 (10/02)

0672885 MB

2 of 3

The Westmoreland Agency, Inc.

DIRECTORS:

Jory A. Berson
Director
15000 Capital One Drive
Richmond, VA 23238

Catherine West
Director
1680 Capital One Dr.
McLean, VA 22102

OFFICERS:

Shawn Budde
President
15000 Capital One Drive
Richmond, VA 23238

Nicholas Sladic
Secretary
11013 West Broad Street
Glen Allen, VA 23060

William Alexander
Treasurer
456 N. Kimball Place
Boise, ID 83704

Matthew Bohnert
Vice President
456 N. Kimball Place
Boise, ID 83704

Lori Baruch
Assistant Secretary
11013 West Broad Street
Glen Allen, VA 23060



3-6-3

ACCOUNT NO. : 072100000032

REFERENCE : 990956 129801A

AUTHORIZATION :

Patricia Kyte

COST LIMIT : \$ 150.00

ORDER DATE : March 31, 2003

ORDER TIME : 11:16 AM

ORDER NO. : 990956-010

CUSTOMER NO: 129801A

CUSTOMER: Ellyn Lee
Capital One Services, Inc.
1680 Capital One Drive

Mc Lean, VA 22102

ANNUAL REPORT FILING

NAME: THE WESTMORELAND AGENCY, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 1156

EXAMINER'S INITIALS: _____

RECEIVED
03 APR - 1 AM 11:49
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA