

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000002394

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** WESTON EXPLOSION, INC

**Current Principal Place of Business:**

238 SW 159TH AVE.  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

238 SW 159TH AVE.  
SUNRISE, FL 33326

**New Mailing Address:**

**FEI Number:** 80-0255525

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KALASUNAS, BARBARA A  
238 SW 159TH AVE  
SUNRISE, FL 33326 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:** VPT  
**Name:** SPRINZEN, LAURIE  
**Address:** 1068 TWIN BRANCH LANE  
**City-St-Zip:** WESTON, FL 33326

**Title:** PT  
**Name:** KALASUNAS, BARBARA  
**Address:** 238 SW 159TH AVE.  
**City-St-Zip:** SUNRISE, FL 33326

**Title:** TT  
**Name:** METHVAN, KATHIE  
**Address:** 1438 CAMELLIA CIRCLE  
**City-St-Zip:** WESTON, FL 33326

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** BARBARA KALASUNAS, PRESIDENT

PT

01/12/2011

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

\_\_\_\_\_  
Date