

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000001226

1. Entity Name
WESSIE'S BAYOU, INC.



Principal Place of Business
5432 COUNTY RD 51
FAUNSDALE, AL 36738

Mailing Address
5432 COUNTY RD 51
FAUNSDALE, AL 36738

FILED
Aug 28, 2007 08:00 AM
Secretary of State



08172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
72-1582923

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

ANDREWS, ANGUS G
694 BALDWIN AVE STE 1
DEFUNIAK SPRINGS, FL 32435

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RANKIN, SARAH
4710 COUNTY RD 51
FAUNSDALE, AL 36738

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
RANKIN, GEORGE
4580 COUNTY ROAD 51
FAUNSDALE, AL 36738

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
RANKIN, JOE L JR
5432 COUNTY ROAD 51
FAUNSDALE, AL 36738

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RATCLIFF, RACHEL
4578 COUNTY ROAD 51
FAUNSDALE, AL 36738

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
BAMBERS, JUILEANNA
P O BOX 28, 1308 W CATHERINE DR
MARION, AL 36756

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000772875
08/28/07-80007-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

X Joe L Rankin Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-25-07

Date

Daytime Phone #