

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13710

FILED  
Feb 24, 2009  
Secretary of State

Entity Name: MARIO OLIVE DIVISION OF WESTIN, INC.

**Current Principal Place of Business:**

11808 WEST CENTER RD  
OMAHA, NE 68144 US

**New Principal Place of Business:**

**Current Mailing Address:**

11808 WEST CENTER RD  
OMAHA, NE 68144 US

**New Mailing Address:**

FEI Number: 47-0615732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CEO ( ) Delete  
Name: CARLSON, SCOTT  
Address: 16427 JONES CIRCLE  
City-St-Zip: OMAHA, NE 68130 US

Title: VP ( ) Delete  
Name: WESTIN, DIANE M  
Address: 9755 FREDERICK STREET  
City-St-Zip: OMAHA, NE 68124 US

Title: S ( ) Delete  
Name: POPPEN, BRADLEY L  
Address: 14101 SAHLER STREET  
City-St-Zip: OMAHA, NE 68164

Title: CH ( ) Delete  
Name: WESTIN, RICHARD S SR  
Address: 9755 FREDERICK CIRCLE  
City-St-Zip: OMAHA, NE 68124 US

Title: D ( ) Delete  
Name: WESTIN-BEHMER, KRISTIN  
Address: 1S758 GROVE HILLS DR  
City-St-Zip: BATAVIA, IL 60510

Title: D ( ) Delete  
Name: WESTIN-HOGAN, KARIN  
Address: 16018 LAKE CIRCLE  
City-St-Zip: OMAHA, NE 68116

**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 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: BRADLEY L POPPEN

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02/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date