

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087633

Entity Name: WILLBEA STORAGE, INC.

FILED  
Apr 11, 2008  
Secretary of State

**Current Principal Place of Business:**

3833 SW BRUNER TERRACE  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

3833 SW BRUNER TERRACE  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 65-0537115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SOPKO, JAMES  
2307 SE MONTEREY ROAD  
STUART, FL 34996 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: D ( ) Delete  
Name: WILLIS, WILLIAM M  
Address: 3644 NW PIN OAK DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: BEAL, SHARON  
Address: 3644 NW PIN OAK DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: PACIFICI, DENNIS  
Address: 2581 SW LONGBOAT WAY  
City-St-Zip: PALM CITY, FL 34990

**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:

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: DENNIS PACIFICI

D

04/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date