2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000057019

1. Entity Name

WESTYE GROUP - SOUTHEAST, INC.

FILED Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

9777 SATELLITE BLVD.

STE. #200

ORLANDO, FL 32837

Mailing Address

9777 SATELLITE BLVD.

STE. #200

ORLANDO, FL 32837



02152007 DO NOT WRITE IN THIS SPACE

Applied For 4. FEI Number 39-1826999 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

F&L CORP. ONE INDEPENDENT DRIVE **SUITE 1300** JACKSONVILLE, FL 32202

DO NOT WRITE IN THIS SPACE

No Chg-P

| | named entity submits this statement for the prions of registered agent. | urpose of changing its re | gistered office or | registered agent, or b | oth, in the State of Florida. I am familiar with, and accept | |
|--|--|--|--------------------------|---|--|--|
| SIGNATURE_ | Signature, typed or printed name of registered agent and title if | applicable. (NOTE, R | legistered Agent signatu | re required when reinstating) | DATE | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Trust Fund Contrib | | \$5.00 May Be Added to Fees | | |
| 10. OFFICERS AND DIRECTO | | TORS | | | <u></u> | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C BAKKE, JAMES J 4717 HAMMERSLEY RD. MADISON, WI 53711 | | | U00000648684 03/07/07-80019-005 150.00 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T SWARTZ, DEBORAH B 4717 HAMMERSLEY RD. MADISON, WI 53711 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | BAKKE, HELEN 717 HAMMERSLEY RD. MADISON, WI 53711 | | | DO | DO NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BERGQUIST, JOHN 9777 SATELLITE BLVD SUITE 200 ORLANDO, FL 32837 | | | IN THIS SPACE | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS RAGATZ, THOMAS G 150 E. GILMAN ST. MADISON. WI 53701 | | | | | |
| TITLE NAME STREET ADDRESS | VP MALGOZA, GEORGE 9777 SATELLITE BLVD SUITE 200 | | | | | |

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:

ORLANDO, FL 32837

IGNING OFFICER OR DIRECTOR