

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092647

FILED
Mar 24, 2004
Secretary of State

Entity Name: WESTERN INFORMATION MANAGEMENT, INC.

Current Principal Place of Business:

2525 FOWLER ST.
FT. MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2525 FOWLER ST.
FT. MYERS, FL 33901

New Mailing Address:

FEI Number: 65-0708586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINN, THOMAS
5235 WILLOW CT.
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

QUINN, THOMAS
2525 FOWLER ST.
FT. MYERS, FL 33901 US

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:

03/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: Y () Delete
Name: QUINN, THOMAS
Address: 5235 WILLOW CT.
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: QUINN, PATRICK
Address: 2508 NOVATO PLACE
City-St-Zip: PALOS VERDES ESTATES, CA 90274

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: Y (X) Change () Addition
Name: QUINN, THOMAS
Address: 2525 FOWLER ST.
City-St-Zip: FT. MYERS, FL 33901

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS QUINN

Y

03/24/2004

Electronic Signature of Signing Officer or Director

Date