

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092647

FILED
May 25, 2007
Secretary of State

Entity Name: WESTERN INFORMATION MANAGEMENT, INC.

Current Principal Place of Business:

4800 CAPE HATTERAS DR.
CLERMONT, FL 34714

New Principal Place of Business:

5100 S. CLEVELAND AVE SUITE
SUITE 318/318
FORT MYERS, FL 33907

Current Mailing Address:

4800 CAPE HATTERAS DR.
CLERMONT, FL 34714

New Mailing Address:

5100 S. CLEVELAND AVE
SUITE 318/318
FORT MYERS, FL 33907

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
5100 S. CLEVELAND AVE
SUITE 318 PMB 318
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

QUINN, THOMAS
5100 S. CLEVELAND AVE
SUITE 318 /318
FT. MYERS, FL 33907 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: THOMAS QUINN

05/25/2007

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: Y () Delete
Name: QUINN, THOMAS
Address: 5100 S. CLEVELAND AVE SUITE 318 PMB 318
City-St-Zip: FT. MYERS, FL 33907

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: 5100 S. CLEVELAND AVE SUITE 318 / 318
City-St-Zip: FT. MYERS, FL 33907

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: THOMAS QUINN

PRES

05/25/2007

Electronic Signature of Signing Officer or Director

Date