2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNUAL REPORT							F-11		
DOCUMENT # V72062							FIL	=0	
1. Entity Name WES PAC, INC.					06 JUI				
WEST AS, INC.						200	JUL-7 A	IA 7: 55	
Principal Place of Business Mailing Address						IALL	RETARY O AHASSEE,	FSTATE	
Principal Place of Business Mailing Address 4423 W. HIGHWAY 98 11040 HUTCHISON			.VD				MASSEE,	FLORIDA	
PANAMA CITY, FL 32401 PANAMA CITY BEACH, FL 3				07					
2. Principal P	Place of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			07052006	Chg-P	CR2E034 (11/05	5) .
City & Stat	te	City & State	City & State			4. FEI Number			Applied For
Zip Country		Zip	Zip Country			59-3149569 Not Applicable S Certificate of Status Desired \$8.75 Additional			
			Zip Country			5. Certificate of		Fee Requi	red
	6. Name and Address of Cur	7. Name and Address of New Registered Agent Name							
CENTANNI, ROY				Street Address (P.O. Box Number is Not Acceptable)					
11040 HUTCHISON BLVD PANAMA CITY, FL 32407					4°0		SW ISIV	4	
				City 0 C C A T I E I Zig Codi					
						va Ciby B		FL Z	<u> </u>
	named entity submits this statement tions of registered agent.	ent for the purpose of changing it: 7	s register	ed office or I	register	ed agent, or both,	in the State of Flo	orida. I am familiar wit	h, and accept
SIGNATURE.								115/06	
Signature, lygged or printed name of profestered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees									
10.	OFFICERS.	AND DIRECTORS	11.			ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTO	IBS IN 11
TITLE	D	Delete	TITL	E	D	_		☐ Change	
NAME STREET ADDRESS				EET ADORESS	Dar	id Trepail 10 Hutchis	nnev sun Blvd		
CITY-ST-ZIP				-ST-ZIP	Pana	ine City &	xaeh Fr	32407	
TITLE NAME	D BURNHAM, WESLEY L., JR.	☐ Delete	TITLI NAM	1		,		☐ Change	Addition
STREET ADDRESS	11212 FRONT BEACH RD	•	STRE	EET ADORESS				<u> </u>	9
CITY-ST-ZIP	PANAMA CITY BCH FL,	☐ Delete	CITY	-SI-ZIP		07/14	1/08 0109) ## 220U: Change	0.00 dddition
NAME		☐ Delete	NAM					Change	: Modition
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS '-ST-ZIP			•		
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NAME STREET ADDRESS			MAM	EET ADDRESS					
CITY=ST-ZIP				-ST-ZIP		<u>-</u>			
TITLE		☐ Delete	TITL					☐ Change	Addition
NAME STREET ADDRESS			NAM Stre	EET ADDRESS					
CITY-ST-ZIP			_	-ST-ZIP					
TITLE NAME		☐ Delete	TITL NAM	1		7/.		☐ Change	Addition
STREET ADDRESS			STR	EET ADDRESS		/////			
CITY-ST-ZIP	certify that the information supplied	t with this filing door not qualify.		r-SI-ZIP	ntainea	Chapter 110	Florida Statutes 1	further certify that the	information
indicated of the col	d on this report or supplemental representation or the receiver or trustee	port is true and accurate and that empowered to execute this repor	my signa rt as requ	iture shali ha	ave the :	same legal effect :	as if made under	oath; that I am an offic	er or director
changed	l, or on an attachment with an addr	ess, with all other like empowered	d.				, /		
SIGNAT	TURE:		T T	avid .	Tre	painier	7/5/00	5 850-23	34-3831
SIGNATURE AND TYPED OR DRINTED WARE OF SIGNING OFFICER OR DIRECTOR Date Deyture Phone I									