2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N42523

Entity Name: WESTCHASE COMMUNITY ASSOCIATION, INC.

FILED Jan 06, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4131 GUNN HIGHWAY 9515 W. LINEBAUGH TAMPA, FL 32808 TAMPA, FL 33626 **Current Mailing Address: New Mailing Address:** 4131 GUNN HIGHWAY 4131 GUNN HIGHWAY TAMPA, FL 32808 TAMPA, FL 33624 US FEI Number: 59-3082256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLARK, ROGANNE M 4131 GÚNN HWY. TAMPA, FL 33624 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MEIER, HARRIET Name: MILLS, JIM Name: 12115 GLENCLIFF CIRCLE Address: 10121 KINGSBRIDGE Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: Title: () Delete (X) Change () Addition COLLAZO, RUBEN Name: Name: LOVE, JOHN Address: 10207 AYRSHIRE Address: 10550 GREENSPRINGS City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: () Delete Title: (X) Change () Addition SULLIVAN, LEROY Name: LAFER, NATHAN Name: 12304 WYCLIFF 9805 GINGERWOOD Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: () Delete Title: (X) Change () Addition Name: THOMAS, KATHY Name: STEIN, JONATHAN 11806 MIDDLEBURY 11810 MARBLEHEAD Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: () Delete Title: () Change (X) Addition DELAMER, BRIAN Name: Name: 10617 TAVISTOCK Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33626 Title: () Delete Title: () Change (X) Addition MANNING, DARYL Name: Name: Address: Address: 10301 GREENHEDGES TAMPA, FL 33626 City-St-Zip: 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM MILLS P 01/06/2003