


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000004383

1. Entity Name
WEST FLORIDA LIVERY ASSOCIATION, INC.



Principal Place of Business Mailing Address

3535 FIRST AVE N PO BOX 16226
SAINT PETERSBURG, FL 33713 CLEARWATER, FL 33766



04282006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3027990 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

MEKLER, IRVIN
3371 TANGLEWOOD TRAIL
PALM HARBOR, FL 34685

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MEKLER, IRVIN 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHAW, DAVE 7880 128TH ST N SEMINOLE, FL 33776
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NEWMAN, KEITH 3535 FIRST AVE N SAINT PETERSBURG, FL 33713
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U00000548896
 05/12/06-90081-022 61.25

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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or an attachment with an address, with all other like empowered

SIGNATURE: Keith Newman 5/12/06 _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #