

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 192444**

1. Entity Name

**WESTMINSTER INC**



Principal Place of Business

**2727 N.OCEAN BLVD.  
DELRAY BCH. FL 33483**

Mailing Address

**2727 N.OCEAN BLVD.  
DELRAY BCH. FL 33483**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/04)

4. FEI Number

**59-0805330**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**POWER, JAMES J  
2727 N OCENA BLVD.  
DELRAY BCH FL 33483**

7. Name and Address of New Registered Agent

Name

Street Address (P O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME POWER, JAMES J  
STREET ADDRESS 2727 N OCEAN BLVD.  
CITY- ST- ZIP DELRAY BEACH FL 33483

TITLE D ☐ Delete  
NAME FITZSIMONS, MICHAEL  
STREET ADDRESS 2727 N OCEAN BLVD.  
CITY- ST- ZIP DELRAY BEACH FL 33483

TITLE TD ☐ Delete  
NAME HUISINGA, JEFFREY M  
STREET ADDRESS 2727 N OCEAN BLVD.  
CITY- ST- ZIP DELRAY BEACH FL 33483

TITLE SD ☐ Delete  
NAME HAMILTON, JAMES  
STREET ADDRESS 2727 N OCEAN BLVD.  
CITY- ST- ZIP DELRAY BEACH FL 33483

TITLE VD ☐ Delete  
NAME WHEATLEY, GEORGE M  
STREET ADDRESS 2727 N OCEAN BLVD.  
CITY- ST- ZIP DELRAY BEACH FL 33483

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000329563  
CITY- ST- ZIP 04/25/05-80123-018 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*George M. Wheatley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**GEORGE M. WHEATLEY**

**APR 20, 2005 561-330-0589**

Date

Daytime Phone