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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748573

1. Corporation Name
WESTSIDE BUSINESS LEADERS ASSOC. INC.

Principal Place of Business	Mailing Address
4224 ORISTANO RD JACKSONVILLE FL 32210 US	P O BOX 7243 JACKSONVILLE FL 32238 US

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 08/17/1979
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2151371 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ **$8.75** Additional Fees Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BALLMAN, RICHARD E 4224 ORISTANO RD JACKSONVILLE FL 32210	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE R E Ballman 4-7-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, RICHARD L 7319 BUNRON DR JACKSONVILLE FL 32222	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D	President Katrena Pitts 2592 Ashford Court Orange Park, FL 32073 ☒ Change ☐ Addition (PD)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PITTS, KATRINA 2592 ASHFORD COURT ORANGE PARK FL 32073	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D	1st Vice President Brian Sheffield 3591 Sanctuary Wood S. Jacksonville, Fla. 32250 ☒ Change ☐ Addition (VD)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BROCATO, ANTHONY W. 5291 COLLINS RD. JACKSONVILLE FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D	2nd Vice President Nancy Pierson 2004 Jones Jacksonville, FL 32220 ☒ Change ☐ Addition (VD)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PERRY-MITCHELL, ROSETTA 8077 CUMBERLAND GAP TRAIL JAX, FL 00000 32244	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BALLMAN, RICHARD E 4224 ORISTANO RD. JACKSONVILLE, FL 00000	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D	Secretary Joe Nairon 4359 Windergale Dr Jax, Fla 32257 ☒ Change ☐ Addition (SD)
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4/7/99 904 779-1099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)