FILED May 01, 2008 8:00 am Secretary of State

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!		ANNL	JAL	KEP	UKI		

1. Entity Nam	MENT #769537 WEST COMMUNITY ASSO			3 90220 032 **						
4501 36TH AVE. WEST 4		Mailing Address 4501 36TH AVE. WEST BRADENTON, FL 3420	-							
2. Principal Place of Business - No P.O. Box # 3. Mi		3. Mailing Address	lailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			ng-NP	CR2E037 (12/	(06)		
City & State		City & State	City & State			4. FEI Number Applied For 59-2315602 Not Applica				
Zip 	Country	Zip	ip Country		5. Certificate of Status Desired Secretary Sec					
	6. Name and Address of Current R	tegistered Agent		Name	7. Name and Add	ress of New F	Registered Agent			
BOUCHARD, DONALD 4507 33RD AVENUE WEST				Street Address (P.O. Box Number is Not Acceptable)						
BRADENI	ON, FL 34209		Ī							
	·			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										
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Fiorida Department of State					
10.	OFFICERS AND DIR		11.		DDITIONS/CHANGE	S TO OFFICE				
NAME STREET ADDRESS CITY-ST-ZIP	GUIDRY, ANDREA 4708 36TH AVENUE W BRADENTON, FL 34209	Delete	NAME STREET CITY-S	raddress 4/フィ	ORIA KINC OB 36 H ADENTON	AVE.	□ Ch WES7	ange X Addition		
ITILE PD NAME CARLOCK, JOHN STREET ADDRESS 4602 34TH AVENUE DRIVE WEST BRADENTON, FL 34209		☐ Detete	TITLE NAME	ADDRESS	HOENIEN (/ <u> </u>	y ∠O /	ange 🔲 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BOUCHARD, DONALD 4507 33RD AVENUE WEST BRADENTON, FL 34209	□ Detete	TITLE NAME STREET CITY-S	ADDRESS :		, <u> </u>	☐ Ch	angé 🗌 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALD COLLANDRA, MARY 4503 36TH AVENUE W BRADENTON, FL 34209	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP			☐ Ch	ange 🗀 Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALD FETCHKO, KENNETH 4704 36TH AVENUE W BRADENTON, FL 34209	□ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP			☐ Ch	ange Addition		
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY-S				□ Chi			
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 on an attachment with an address, with all other like empowered.										
SIGNATURE: Name & Bouch Donard E. BOUCHURD 15 04/28/08 941-742-2821 SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Date Daysing Proce 8										