

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

03-26-2001 90154 008 ****61.25

DOCUMENT # 769993

1. Entity Name

THE WESTSHORE ALLIANCE, INC.

Principal Place of Business

5444 BAY CTR DR
 STE 115
 TAMPA FL 33609
 US

Mailing Address

5444 BAY CTR DR
 STE 115
 TAMPA FL 33609
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2330147

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

REED, JAMES M
 201 N FRANKLIN STREET, STE 2600
 TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Ronald Rotella

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

5444 Bay Center Dr Suite 115

City

Tampa

FL

Zip Code

33609

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.

SIGNATURE

[Signature]

Ronald Rotella

3/22/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

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

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	REED, JAMES	
STREET ADDRESS	5444 BAY CTR DR- #115	
CITY-ST-ZIP	TAMPA FL	
TITLE	SD	☒ Delete
NAME	PREUSCH, BARRY	
STREET ADDRESS	5444 BAY CTR DR- #115	
CITY-ST-ZIP	TAMPA FL	
TITLE	VD	☐ Delete
NAME	MILLER, LOUIS	
STREET ADDRESS	5444 BAY CTR DR- #115	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	MD	☐ Delete
NAME	ROTELLA, RONALD T.	
STREET ADDRESS	5444 BAY CTR DR- #115	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	TD	☐ Delete
NAME	WESSMAN, JIM	
STREET ADDRESS	5444 BAY CTR DR- #115	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Change ☐ Addition
NAME	Miller, Louis	
STREET ADDRESS	5444 Bay Center Dr #115	
CITY-ST-ZIP	Tampa FL 33609	
TITLE	VD	☐ Change ☒ Addition
NAME	Coen, Randy	
STREET ADDRESS	5444 Bay Center Dr #115	
CITY-ST-ZIP	Tampa FL 33609	
TITLE	SD	☐ Change ☒ Addition
NAME	Coulter, Jay	
STREET ADDRESS	5444 Bay Center Dr. #115	
CITY-ST-ZIP	Tampa, FL 33609	
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 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:

[Signature] **SIGNATURE REQUIRED** Ronald Rotella 3/22/01

(813)289-5488

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E037 (10/00)