2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007
Secretary of State

DOCUMENT# 827984

Entity Name: WESTBY CORPORATION

Current Principal Place of Business:

1710 LAKE GROVES RD NW
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

11450 SE DIXIE HWY
SUITE 203
HOBE SOUND, FL 33455 US

New Mailing Address:

FEI Number: 51-0115384 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GODWIN, L. WAYNE
1710 LAKE GROVES RD NW
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: CASPERSEN, FINN M
Address: 11450 SE DIXIE HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: PDT ( ) Delete
Name: CASPERSEN, BARBARA M
Address: 11450 SE DIXIE HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: VP ( ) Delete
Name: CASPERSEN, FINN JR M
Address: 11450 SE DIXIE HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: VP ( ) Delete
Name: CASPERSEN, ERIK M
Address: 11450 SE DIXIE HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: S ( ) Delete
Name: KEEGAN, LUCILLE F
Address: 240 MAIN STREET
City-St-Zip: GLADSTONE, NJ 07934

Title: VP ( ) Delete
Name: GODWIN, L. WAYNE
Address: 1710 LAKE GROVES RD NW
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: KEEGAN, LUCILLE F
Address: 11450 SE DIXIE HWY
City-St-Zip: HOBE SOUND, FL 33455

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FINN M. W. CASPERSEN CD 04/19/2007

Electronic Signature of Signing Officer or Director Date