

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001943

FILED
Mar 06, 2006
Secretary of State

Entity Name: WESTSHORE MANAGEMENT, INC.

Current Principal Place of Business:

10069 N. FLORIDA AVE.
SUITE B-1
TAMPA, FL 33612

New Principal Place of Business:

10069 N. FLORIDA AVE.
SUITE A-3
TAMPA, FL 33612

Current Mailing Address:

10069 N. FLORIDA AVE.
SUITE B-1
TAMPA, FL 33612

New Mailing Address:

10069 N. FLORIDA AVE.
SUITE A-3
TAMPA, FL 33612

FEI Number: 02-0564761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, MICHAEL
10069 N. FLORIDA AVE.
SUITE B-1
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

HAYES, MICHAEL
10069 N. FLORIDA AVE.
SUITE A-3
TAMPA, FL 33612 US

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: MICHAEL E. HAYES

03/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: HAYES, MICHAEL
Address: 9107 WOODRIDGE RUN DRIVE
City-St-Zip: TAMPA, FL 33647

Title: VCV () Delete
Name: HILL, DAVID
Address: 601 WEST MORGAN STREET
City-St-Zip: JACKSONVILLE, FL 32650

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VCV (X) Change () Addition
Name: HILL, DAVID
Address: 325 WEST STATE STREET
City-St-Zip: JACKSONVILLE, FL 32650

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: MICHAEL E. HAYES

CP

03/06/2006

Electronic Signature of Signing Officer or Director

Date