2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005200

Entity Name: WEST PARK MANAGEMENT, INC.

FILED Jul 21, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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PALATKA OAKS 200 COLLEGE RD PALATKA, FL 32177

Current Mailing Address: New Mailing Address:

WEST PARK DBA PALATKA OAK PO BOX 241402 MONTGOMERY, AL 361241402

FEI Number: 63-1110366 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

City-St-Zip:

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

BLANCHARD, JOHN D

MONTGOMERY, AL 36117

7020 FAIN PARK DRIVE, SUITE 5

(X) Change () Addition

Title: DP () Delete

Name: BLANCHARD, JOHN D

Address: 8560 MINNIE BROWN ROAD STE. 124

City-St-Zip: MONTGOMERY, AL 36117

Title: DVP () Delete Title: DVP (X) Change () Addition

Name: MILLER, SAMUEL L Name: MILLER, SAMUEL L

Address: 8560 MINNIE BROWN ROAD STE. 124 Address: 7020 FAIN PARK DRIVE, SUITE 5
City-St-Zip: MONTGOMERY, AL 36117 City-St-Zip: MONTGOMERY, AL 36117

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN D. BLANCHARD PRES 07/21/2004