FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

G71083 **DOCUMENT #**

(1)

WEST SHORE REALTY OF PINELLAS, INC.							
Principal Place of Business Mailing Address * DEE W. DAY				·	THE REPORT OF THE PARTY OF THE		
				Date Incorporated or Qualified 01/01/1984	3a. Date of Last Report 04/28/1995		
2. Principal Place of Business		2a. Mailing Address 26			4. FEI Number 59-2382673	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip ≱4	Country 25	Ζφ 29	Country 30		This corporation has liability for intangible fax under s 199.032, Florida Statutes		
	g. Name and Address of Curren	t Registered Agent	8	I Nan	10. Name and Address of New R	egistered Agent	
DAY, DE	EW		Ľ	Name			
	ic vv. Bulf blvd.		82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
	REDINGTON BEACH FL 33708		8:	3			
				1 04		les I 7 - O-de	
			84	City		FL 85 Zip Code	
or register	to the provisions of Sections 607.0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Sections	la Such change was authori.	zed by the cor	named corpo poration's boa	ration submits this statement for the pur ird of directors. I hereby accept the appo	pose of changing its registered office binfinent as registered agent. I am	
SIGNATURE .	Signative ityped or prided native of registered agents	s अविकासित्रकृत स्तरक (N	ن المانية الم	er f Seje af ine nespain	Julian rangistragi	CAIL	
12.	OFFICERS AND	the contract of the contract o	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1 1 TAFLE	•		Change Addition	
NAME			1.2 NAME	'			
STREET ADDRESS	s 422 N. BATH CLUB BLVD N. REDINGTON BCH FL			1 ADDRESS			
CITY - ST - ZIP	14. NEDINGTON BUTT TE	DELETE	1.4 CITY -			Chagas Addition	
TITLE NAME		L' DELETE	2 1 Till E 2 2 NAME			Change Addition	
STREET ADORESS				.1 ADORESS			
CITY - ST - ZIP			2.4 CiTy -				
TITLE	DELETE		3 1 TITLE			Change Addition	
NAME		_	3 2 NAME				
STREET ADDRESS			3.3 STRE	ET ADORESS			
CITY - ST - ZIP			3.4.0111	\$1-26			
TITLE		☐ DELETE	4 1 TITLE			Change Addition	
NAME			4.2 NAME				
STREET ADDRESS			4 3 STRE	-LADORESS			
CIFY-ST-ZIP			4.4 CITY -	ST-ZIF			
TITLE		☐ DELETE	5 1 1111.6	i		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			•	T ADDRESS			
CITY-ST-ZIP		F-1 the tar	5 4 CHY-				
THTLE		☐ DELETE	6 1 TITLE	- 1		Change Addition	
NAME			6 2 NAME				
STREET ADDRESS				EL AUDRESS			
CITY - ST - ZIP	<u> </u>		6 4 CITY -	\$1 - 2(P			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 # changed, or an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED TAME OF SIGNING OFFICER OR DIRECTOR

4/17/96 (813) 392-5355