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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90011 025 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K19771

1. Corporation Name

WESTO DEVELOPMENT, INC.

Principal Place of Business

300 WILSHIRE BLVD
STE. 205
CASSELBERRY FL 32707
US

Mailing Address

300 WILSHIRE BLVD.
STE 205
CASSELBERRY FL 32707
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

WRIGHT, LYNN W
2716 REW CIRCLE
SUITE 102
OCFEE FL 34761

3. Date Incorporated or Qualified

03/30/1988

4. FEI Number

59-2885060

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

X Yes [] No

10. Name and Address of New Registered Agent

81 Name C. PHILIP WALLIS

82 Street Address (P.O. Box Number is Not Acceptable)
900 S. LAKE STERLING COURT

83

84 City CASSELBERRY

FL

85 Zip Code 32707

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

C. Philip Wallis, C. PHILIP WALLIS, PRES

APRIL 26, 1999

DATE

12. OFFICERS AND DIRECTORS

TITLE PD [] DELETE
NAME WALLIS, CHARLES PHILIP
STREET ADDRESS 300 WILSHIRE BLVD, STE 205
CITY-ST-ZIP CASSELBERRY FL 32707

TITLE D [] DELETE
NAME COLE, WILLIAM W. JR
STREET ADDRESS 300 WILSHIRE BLVD., STE. 205
CITY-ST-ZIP CASSELBERRY FL

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE [] Change [] Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE [] Change [] Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE [] Change [] Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE [] Change [] Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE [] Change [] Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE [] Change [] Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Charles Philip Wallis, CHARLES PHILIP WALLIS, PRES APRIL 26, 1999 407-831-3799

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Phone #

CR2E034 (11/98)

0068527