## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## May 04, 1999 8:00 am Secretary of State

05-04-1999 90191 003 \*\*\*150.00

DOCUI  1. Corporation  WESTLA		1			
Principal Place	of Business	Mailing Address		I SANIBUSI ORI USION SINUA INSI DIMAN DOM	115 Minis Minis minis Minis minis indi
		4007 61ST ST W Bradenton FL 34209 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
				12/14/1988	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# oto	Suite, Apt. #, etc.		65-0092551	Not Applicable \$8.75 Additional
22	#, etc.	27		5. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip	Country 30	This corporation owes the current year     Personal Property Tax.	Intangible No
24	9. Name and Address of Curren		30	10. Name and Address of New Register	
			81 Name		
SWAN III, WILLIAM W 4007 61ST ST W BRADENTON FL 34209			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
			84 City	F	85 Zip Code
SIGNATURE	m familiar with, and accept the obligated familiar with, and	t and title if applicable. (NOTE:	Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	
12.	STD	DELETE	1,1 TITLE	ADDITIONS/OFFARIOLS TO OFFIGERO	Change Addition
NAME	SWAN, WILLIAM		1.2 NAME		
STREET ADDRESS	2808 NORTHWOOD WAY		1,3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	GEIST, LARRY E		2.2 NAME		
STREET ADDRESS	110 ROARDING ROCKS RD.		23 STREET ADDRESS		
CITY-ST-ZIP	UPPER BLACK EDDY PA	O PELETE	2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE 3.2 NAME		□ change □ Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		}
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change
NAME			5.2 NAME		}
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DĒLETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
TITLE NAME			6.2 NAME		
STREET ADDRESS	• • • •		6.3 STREET ADDRESS		
CITY-ST-ZIP	, · · · · · · · · · · · · · · · · · · ·		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 607, 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.

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR