

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55572

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: WESTBROOK SERVICE CORPORATION

**Current Principal Place of Business:**

1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

**New Mailing Address:**

FEI Number: 59-2924166      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONROY, CAROL A  
1411 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DCEO ( ) Delete  
Name: MATTHEWS, OWEN STROU, D  
Address: 2034 COVE TRAIL  
City-St-Zip: WINTER PARK, FL 32789

Title: DVP ( ) Delete  
Name: ROBERTS, JAMES  
Address: 1748 COLLEEN DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: VD ( ) Delete  
Name: GLANCY, DANIEL G,  
Address: 210 NE TRIPLET DR.  
City-St-Zip: CASSELBERRY, FL 32707

Title: T ( ) Delete  
Name: CRAIN, SHANE  
Address: 14232 MAILER BLVD  
City-St-Zip: ORLANDO, FL 32828

Title: P ( ) Delete  
Name: THURMAN, DAVID J  
Address: 114 WATER OAK LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S ( ) Delete  
Name: CONROY, CAROL A  
Address: 419 MINNEHAHA ROAD  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CAROL A. CONROY

S

03/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date