

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55572

FILED
Feb 03, 2010
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
Name: MATTHEWS, OWEN STROUD
Address: 2034 COVE TRAIL
City-St-Zip: WINTER PARK, FL 32789

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

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: OWEN S. MATTHEWS

DCEO

02/03/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date