

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

-FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 11:09

DOCUMENT # L33101

(1)

1. Corporation Name

WESTCLIFFE CORP.

Principal Place of Business

Mailing Address

% PAUL THIBADEAU
249 ROYAL PALM WAY, 4TH FLOOR
PALM BEACH FL 33480

3779 TOULOUSE DR.
PALM BEACH GARDENS FL 33410
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/01/1989

3a. Date of Last Report

01/21/1994

4. FEI Number

13-3347842

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3779 TOULOUSE DR

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 PALM BEACH GARDENS, FL

28

Zip

Country

Zip

Country

24 33410

25 U.S.

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THIBADEAU, PAUL
249 ROYAL PALM WAY
4TH FLOOR
PALM BEACH FL 33480

81 Name

DONALD J. GREENE

82 Street Address (P.O. Box Number is Not Acceptable)

3779 TOULOUSE DR

83

84

PALM BEACH GARDENS, FL

85 Zip Code

33410

11. Pursuant to the provisions of Sections 603.0502 and 603.1508, 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 603.0505, Florida Statutes.

SIGNATURE

(Signature of Donald J. Greene)

(DONALD J. GREENE)

6 FEB. 1995

Signature, name, or printed name of registered agent, if not applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD
NAME	GREENE, DONALD J.
STREET ADDRESS	3779 TOULOUSE DRIVE
CITY - ST - ZIP	PALM BEACH GARDENS FL
TITLE	PD
NAME	GREENE, HANNELORE
STREET ADDRESS	3779 TOULOUSE DR
CITY - ST - ZIP	PALM BCH GDN FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 110.07(3)(b), 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 resolver 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.

SIGNATURE: *Hannelore Greene* (HANNELORE GREENE) 6 FEB. 1995 624-2020

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number