

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2008 8:00 am**  
**Secretary of State**

01-31-2008 90022 036 \*\*\*\*70.00

<b>DOCUMENT # N00000003258</b> 1. Entity Name <b>WEST SHORE PLAZA ASSOCIATION, INC.</b>					
Principal Place of Business <b>1 RYANT BOULEVARD SEBRING, FL 33872</b>				Mailing Address <b>1 RYANT BOULEVARD SEBRING, FL 33872</b>	
2. Principal Place of Business - No P.O. Box # <b>4094 Santa Barbara Dr</b>		3. Mailing Address <b>4094 Santa Barbara Dr.</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Sebring FL</b>		City & State <b>Sebring FL</b>		4. FEI Number <b>59-2823555</b>	
Zip <b>33875</b>		Country 		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>TRANSUE, DONALD W 1 RYANT BOULEVARD SEBRING, FL 33872</b>				7. Name and Address of New Registered Agent Name <b>Michele Transue</b> Street Address (P.O. Box Number is Not Acceptable) <b>4094 Santa Barbara Dr.</b> City <b>Sebring</b> FL Zip Code <b>33875</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>Michele G. Transue</i></u> <span style="float: right;">1/28/08</span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TRANSUE, DONALD W 1 RYANT BOULEVARD SEBRING, FL 33872	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP SANDERS, IRELAND E 74 TOWER STREET LAKE PLACID, FL 33852	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TRANSUE, MICHELE 1 RYANT BOULEVARD SEBRING, FL 33872	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director, President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Treasurer
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dr. Keatley Waldron <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 13 Ryant Blvd Sebring FL 33872
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Don Transue, <del>III</del> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7200 Greeshore Dr D. Austin TX 78730 Secretary
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Michele G. Transue</i></u> <span style="float: right;">1/28/08 385-0414</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)</small>					