


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90213 010 ****61.25

DOCUMENT # N01000007760 1. Entity Name WESTLAND UMBRELLA ASSOCIATION, INC.					
Principal Place of Business 8833 PERIMETER PRK BLVD STE 1104 JACKSONVILLE, FL 32216			Mailing Address 8833 PERIMETER PRK BLVD STE 1104 JACKSONVILLE, FL 32216		
2. Principal Place of Business - No P.O. Box # 134 Second Avenue North		3. Mailing Address 134 Second Avenue North			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		04252007 Chg-NP CR2E037 (12/06)	
City & State Jacksonville Beach, FL		City & State Jacksonville Beach, FL		4. FEI Number FL 04-3621531	
Zip 32250		Country Duval		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YOUNG, JAMES R 8833 PERIMETER PRK BLVD STE 1104 JACKSONVILLE, FL 32216			7. Name and Address of New Registered Agent Name Michael A. Walters Street Address (P.O. Box Number is Not Acceptable) Fowler White Boggs Banker P.A. 50 No. Laura Street, Suite 2200 City Jacksonville FL 32202		
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 <i>[Signature]</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, JAMES R 8833 PERIMETER PRK BLVD STE 1104 JACKSONVILLE, FL 32216	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/Director James Alexander 134 Second Avenue North Jacksonville Beach, FL 32250	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STAPP, MARK 6106 S. 32ND ST. PHOENIX, AZ 85040	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Director James McCumber 7502 Plantation Bay Drive Jacksonville, FL 32244	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWELL, WILLIAM R II PO BOX 60, ORTEGA STATION JACKSONVILLE, FL 32210	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Director Batey McGraw 7502 Plantation Bay Drive Jacksonville, FL 32244	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input 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		<input 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		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 the life empowered.					
SIGNATURE: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<div style="text-align: right;"> <i>4/26/07</i> Date <i>904 477-...</i> Daytime Phone # </div>					