2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# N03000001748

Entity Name: WESTLAND PARK TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1304 S DESOTO AVE. #200
TAMPA, FL 33606

New Principal Place of Business:

PO BOX 130598
TAMPA, FL 33681

Current Mailing Address:

1304 S DESOTO AVE. #200
TAMPA, FL 33606

New Mailing Address:

PO BOX 130598
TAMPA, FL 33681

FEI Number: 75-3145978 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRANT, JAMES E
1304 S DESOTO AVE. #200
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

PROVINCE, JEFF
PO BOX 130598
TAMPA, FL 33681 US

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: JEFF PROVINC 04/05/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BRANT, JAMES E
Address: 1304 S. DESOTO AVE. #200
City-St-Zip: TAMPA, FL 33606

Title: D (X) Delete
Name: BRANT, ALECIA G
Address: 1304 S. DESOTO AVE. #200
City-St-Zip: TAMPA, FL 33606

Title: STD (X) Delete
Name: SILVER, THOMAS
Address: 1304 S. DESOTO AVE. #200
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change ( ) Addition
Name: PROVINCE, JEFF
Address: PO BOX 130598
City-St-Zip: TAMPA, FL 33681

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF PROVINCE TR 04/05/2005
Electronic Signature of Signing Officer or Director Date