

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004248

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** WEST PARK VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Principal Place of Business:**

**Current Mailing Address:**

2180 WEST STATE ROAD 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Mailing Address:**

**FEI Number:** 90-0083004

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 32779 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

**OFFICERS AND DIRECTORS:**

Title: TSD  
Name: STANLEY, LIESA  
Address: 9411 CAVENDISH DR #101  
City-St-Zip: TAMPA, FL 33626

Title: PD  
Name: BERGER, JASON  
Address: 10409 CRIMSON PARK LN #108  
City-St-Zip: TAMPA, FL 33626

Title: D  
Name: STEELE, ANN  
Address: 9410 GEORGIAN PARK LN #104  
City-St-Zip: TAMPA, FL 33626

Title: D  
Name: GODFREY, LISA  
Address: 9512 WEST PARK VILLAGE DR #105  
City-St-Zip: TAMPA, FL 33626

Title: D  
Name: CALLAWAY, PAM  
Address: 9510 GEORGIAN PARK LN #101  
City-St-Zip: TAMPA, FL 33626

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JASON BERGER

PD

04/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date