

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 26, 2005
Secretary of State

DOCUMENT# N03000006676

Entity Name: WESTSIDE TOWNHOMES PHASE 5 ASSOCIATION, INC.**Current Principal Place of Business:**61 W COLONIAL DRIVE
ORLANDO, FL 32801**New Principal Place of Business:**1402 FETLER WAY
WINTER GARDEN, FL 34787**Current Mailing Address:**61 W COLONIAL DRIVE
ORLANDO, FL 32801**New Mailing Address:**P.O. BOX 783334
WINTER GARDEN, FL 34778**FEI Number:** 81-0627589**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LEE, SYLVIA
61 W COLONIAL DRIVE
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**BELL, LOU ELLEN
1402 FETLER WAY
WINTER GARDEN, FL 34787 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: LOU ELLEN BELL

09/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHOEMAKER, JOHN B
Address: 61 W COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: SD () Delete
Name: LEE, SYLVIA
Address: 61 W COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: TD () Delete
Name: TRENT, SHARON
Address: 61 W COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32801

Title: VPD (X) Delete
Name: COHEN, ODED
Address: 61 W COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELL, LOU ELLEN
Address: P.O. BOX 783334
City-St-Zip: WINTER GARDEN, FL 34778

Title: VPD (X) Change () Addition
Name: CARTIER, RICHARD
Address: P.O. BOX 783334
City-St-Zip: WINTER GARDEN, FL 34778

Title: STD (X) Change () Addition
Name: SHAW, RICHARD
Address: P.O. BOX 783334
City-St-Zip: WINTER GARDEN, FL 34778

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: LOU ELLEN BELL

P

09/26/2005

Electronic Signature of Signing Officer or Director

Date