

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002545

FILED  
Mar 28, 2012  
Secretary of State

**Entity Name:** WESTCHASE PROFESSIONAL CENTER OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

10923 COUNTRYWAY BLVD  
TAMPA, FL 33626 US

**New Principal Place of Business:**

**Current Mailing Address:**

17824 N. US HWY 41  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 20-8752407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEZER, STEVEN H  
1801 N. HIGH LAND  
TAMPA, FL 33602 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: PD  
Name: WATERMAN, WILLIAM  
Address: 17824 N. US HWY 41  
City-St-Zip: LUTZ, FL 33549 US

Title: VP  
Name: MCEWAN, SCOTT  
Address: 17824 N. US HWY 41  
City-St-Zip: LUTZ, FL 33549 US

Title: SD  
Name: JACOBS, PAUL  
Address: 17824 N. US HWY 41  
City-St-Zip: LUTZ, FL 33549 US

Title: TD  
Name: CAULLEY, RICHARD  
Address: 17824 N. US HWY 41  
City-St-Zip: LUTZ, FL 33549 US

Title: D  
Name: LAPELLA, MICHAEL  
Address: 17824 N. US HWY 41  
City-St-Zip: LUTZ, FL 33549

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: WILLIAM WATERMAN

PRES

03/28/2012

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

\_\_\_\_\_  
Date