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Apr 05, 2007 8:00 am
Secretary of State
03-21-2007 90045 038 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000003386

1. Entity Name
WEST PARK INDUSTRIAL CENTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1002 E. NEWPORT CENTER DRIVE 100 DEERFIELD BEACH, FL 33442 US	1002 E. NEWPORT CENTER DRIVE 100 DEERFIELD BEACH, FL 33442 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
581 Mercantile Place	Westpark Ind. Ctr. Assn Inc.
Suite, Apt. #, etc.	Suite/Apt. #, etc. 2295 NW Corporate BLVD Suite 138
City & State Port St. Lucie FL	City & State Boca Raton FL
Zip 34986 Country ~~USA~~ Port St Lucie	Zip 33431 Country Palm Beach

01242007 Chg-NP CR2E037 (12/06)

4. FEI Number 20-4578426 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STALLONE, ANDREW 1002 E. NEWPORT CENTER DRIVE 100 DEERFIELD BEACH, FL 33442	Name: LARRY MORINA Street Address (P.O. Box Number is Not Acceptable): 2295 NW Corporate BLVD Suite 138 City: Boca Raton, FL Zip Code: 33431

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: Larry Morina. DATE

(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	P -TRES. STALLONE, ANDREW 1002 E. NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Jon Miller 575 NW Mercantile Place PORT ST. LUCIE, FL 34986	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Jon Miller - Unit 102 575 NW Mercantile Place Port St. Lucie FL 34986	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC. greg Simpson 9481 SW Abingdon Ave Port St. Lucie FL 34953.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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 other like empowered.

SIGNATURE: _____ 3/12/07 561-241-0285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #