

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009722

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** WESLEY HILLS PROFESSIONAL CONDOMINIUM CENTER OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

18936 N. DALE MABRY HIGHWAY  
LUTZ, FL 33548

**New Principal Place of Business:**

855 MANDALAY AVE  
CLEARWATER, FL 33767

**Current Mailing Address:**

18936 NORTH DALE MABRY HIGHWAY  
LUTZ, FL 33548

**New Mailing Address:**

855 MANDALAY AVE  
CLEARWATER, FL 33767

**FEI Number:** 83-0467818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, THOMAS J  
18936 NORTH DALE MABRY  
LUTZ, FL 33548 US

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

LEE, THOMAS J  
855 MANDALAY AVENUE  
CLEARWATER, FL 337678 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: THOMAS LEE

04/29/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LEE, THOMAS J JR  
Address: 855 MANDALAY AVENUE  
City-St-Zip: CLEARWATER, FL 33767

Title: D  
Name: RUSSO, CHARLES  
Address: 567 OCEANSIDE COURT  
City-St-Zip: PALM HARBOR, FL 34683

Title: D  
Name: LEE, LARA  
Address: 567 OCEANSIDE COURT  
City-St-Zip: PALM HARBOR, FL 34683

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: THOMAS LEE

MANA

04/29/2010

Electronic Signature of Signing Officer or Director

Date