2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07133

FILED Mar 28, 2005 Secretary of State

Entity Name: WESCOTT SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

701 ENTERPRISE ROAD EAST SUITE 302

SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

701 ENTERPRISE ROAD EAST SUITE 302 SAFETY HARBOR, FL 34695 US

FEI Number: 59-2518845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MEZER, STEVEN H.

220 SOUTH FRANKLIN STREET
TAMPA, FL 33602 US

CIANFRONE, JOSEPH R
1964 BAYSHORE BLVD
DUNEDIN, FL 34698 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: JOSEPH R CIANFRONE 03/28/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD () Delete Title: SD (X) Change () Addition Name: GILLOT, DORETTA SILLOT, DORETTA

 Name:
 GILLOT, DORETTA
 Name:
 GILLOTT, DORETTA

 Address:
 3136 WINDMOOR DR
 Address:
 3136 WINDMOOR DR

 City-St-Zip:
 PALM HARBOR, FL 34685
 City-St-Zip:
 PALM HARBOR, FL 34685

Title: VD () Delete Title: TD (X) Change () Addition

Name: KUMRO, PAUL Name: KUMRO, PAUL

Address: 3220 JADEMOOR CIRCLE Address: 3220 JADEMOOR CIRCLE
City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685

Title: PD () Delete Title: () Change () Addition

 Name:
 MALAK, CAROL
 Name:

 Address:
 2992 WINDMOOR DRIVE
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34685
 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: CAROL MALAK PD 03/28/2005