

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000011550

FILED
Jan 13, 2012
Secretary of State

Entity Name: WESTSIDE COMMUNITY CENTER, INC.

Current Principal Place of Business:

4818 US HWY 90 WEST, SUITE 102
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

4818 US HWY 90 WEST, SUITE 102
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 61-1608751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTEN, STANLEY
4818 US HWY 90 WEST, SUITE 102
LAKE CITY, FL 32055 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: D
Name: BATTEN, STANLEY
Address: 4818 US HWY 90 WEST, SUITE 102
City-St-Zip: LAKE CITY, FL 32055

Title: D
Name: STANLEY, PENNY
Address: 167 SW CAROL PLACE
City-St-Zip: LAKE CITY, FL 32055

Title: D
Name: STANLEY, JERRY
Address: 167 SW CAROL PLACE
City-St-Zip: LAKE CITY, FL 32055

Title: D
Name: COLSON, RUBY
Address: 5578 SW PINEMOUNT RD.
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: COATS, LUCILLE
Address: 5363 SW PINEMOUNT RD.
City-St-Zip: LAKE CITY, FL 32024

Title: D
Name: HOWARD, LINDA S
Address: 246 SW WHEAT PLACE
City-St-Zip: LAKE CITY, FL 32024

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: LINDA S. HOWARD

SECR

01/13/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date