

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16955

FILED
Apr 27, 2004
Secretary of State

Entity Name: WESTLAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

%JAMES A. JAHNA
343 WEST CENTRAL AVENUE, SUITE 7
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

%JAMES A. JAHNA
PO BOX 840
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 59-2780632 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAVEL, JOHN
343 W. CENTRAL AVE #2
LAKE WALES, FL 33853 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: TD () Delete
Name: JAHNA, JAMES A
Address: 202 E. STUART AVE
City-St-Zip: LAKE WALES, FL 33853 US

Title: PD () Delete
Name: GRAVEL, JOHN M
Address: 343 W. CENTRAL AVE. #2
City-St-Zip: LAKE WALES, FL 33853

Title: SD () Delete
Name: CHARTRAND, CAROL C
Address: 343 W CENTRAL AVE. STE 8
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: STODEMIRE, JOHN
Address: 2562 ELM ST
City-St-Zip: LAKE WALES, FL 33853

Title: VPD () Delete
Name: CARTSAND, DAVID
Address: 343 W. CENTRAL AVE. STE 8
City-St-Zip: LAKE WALES, FL 33853

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JAMES A JAHNA

TD

04/27/2004

Electronic Signature of Signing Officer or Director

Date