

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90092 007 ****61.25

DOCUMENT # N16955

1. Entity Name
WESTLAKE CONDOMINIUM ASSOCIATION, INC.



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

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04152006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-2780632

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

GRAVEL, JOHN
343 W. CENTRAL AVE #2
LAKE WALES, FL 33853

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2006**

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 TD ☒ Delete
NAME JAHNA, JAMES A
STREET ADDRESS 202 E. STUART AVE
CITY-ST-ZIP LAKE WALES, FL 33853

TITLE ☒ Change ☐ Addition
NAME **JP CHARTRAND, CAROL C.**
STREET ADDRESS **343 W. CENTRAL AVE, Ste 208**
CITY-ST-ZIP **LAKE WALES, FL 33853**

TITLE PD ☐ Delete
NAME GRAVEL, JOHN M
STREET ADDRESS 343 W. CENTRAL AVE. #2
CITY-ST-ZIP LAKE WALES, FL 33853

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME CHARTRAND, CAROL C
STREET ADDRESS 343 W CENTRAL AVE. STE 8
CITY-ST-ZIP LAKE WALES, FL 33853

TITLE ☐ Change ☒ Addition
NAME **SD Suzanne Hartell**
STREET ADDRESS **343 W. CENTRAL AVE, Ste 103**
CITY-ST-ZIP **LAKE WALES, FL 33853**

TITLE D ☒ Delete
NAME STODEMIRE, JOHN
STREET ADDRESS 2562 ELM ST
CITY-ST-ZIP LAKE WALES, FL 33853

TITLE ☐ Change ☒ Addition
NAME **D Ronald Hartell**
STREET ADDRESS **343 W. CENTRAL AVE, Ste 103**
CITY-ST-ZIP **LAKE WALES, FL 33853**

TITLE VPD ☐ Delete
NAME CARTSAND, DAVID
STREET ADDRESS 343 W. CENTRAL AVE. STE 8
CITY-ST-ZIP LAKE WALES, FL 33853

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 empowerments.

SIGNATURE:

John M. Gravel

4/17/06 8636768058

Date

Daytime Phone #