

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16955

FILED
Sep 05, 2009
Secretary of State

Entity Name: WESTLAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

WESTLAKE ASSOC.
343 W. CENTRAL AVE STE 102
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

JOHN GRAVEL
P.O. BOX 101
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 59-2780632 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GRAVEL, JOHN
343 W. CENTRAL AVE STE 102
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

GRAVEL, JOHN
343 W. CENTRAL AVE
STE 102
LAKE WALES, FL 33853 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:

09/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CHARTAND, CAROL C
Address: 343 WEST CENTRAL AVE SUITE 208
City-St-Zip: LAKE WALES, FL 33853 US

Title: PD () Delete
Name: GRAVEL, JOHN M
Address: 343 W. CENTRAL AVE STE 102
City-St-Zip: LAKE WALES, FL 33853

Title: SD () Delete
Name: HARRELL, SUZANNE
Address: 343 WEST CENTRAL AVE SUITE 103
City-St-Zip: LAKE WALES, FL 33853

Title: D () Delete
Name: HARRELL, RONALD
Address: 343 WEST CENTRAL AVE SUITE 103
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: TD (X) Change () Addition
Name: CHARTRAND, CAROL C
Address: 343 WEST CENTRAL AVE SUITE 208
City-St-Zip: LAKE WALES, FL 33853 US

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: VPD (X) Change () Addition
Name: CHARTRAND, DAVID
Address: 343 W. CENTRAL AVE. STE 8
City-St-Zip: LAKE WALES, FL 33853

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHN M. GRAVEL

PD

09/05/2009

Electronic Signature of Signing Officer or Director

Date