

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16955

FILED  
Jul 12, 2010  
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:**

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

**Current Mailing Address:**

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

**New Mailing Address:**

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

**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  
STE 102  
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  
Name: CHARTRAND, CAROL C  
Address: 343 WEST CENTRAL AVE SUITE 208  
City-St-Zip: LAKE WALES, FL 33853 US

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

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

Title: D  
Name: HARRELL, RONALD  
Address: 343 WEST CENTRAL AVE SUITE 103  
City-St-Zip: LAKE WALES, FL 33853

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

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: JOHN M. GRAVEL

PD

07/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date