

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 03, 2008
Secretary of State**

DOCUMENT# N21236

Entity Name: WESTCHESTER ASSOCIATION AT METROWEST, INC.**Current Principal Place of Business:**6564 ABERCROMBIE CT
ORLANDO, FL 32835**New Principal Place of Business:**6540 PICCADILLY LANE
ORLANDO, FL 32835**Current Mailing Address:**POST OFFICE BOX 616702
ORLANDO, FL 32861**New Mailing Address:**

FEI Number: 65-0240802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:IVERSON-BATES, J M
6564 ABERCROMBIE CT
ORLANDO, FL 32835 US**Name and Address of New Registered Agent:**EMBREE, DARLENE L
6540 PICCADILLY LANE
ORLANDO, FL 32835 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: DARLENE L EMBREE

10/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: IVERSON, J M
Address: 6564 ABERCROMBIE CT
City-St-Zip: ORLANDO, FL 32835

Title: VPD () Delete
Name: WYNN, CALVERT W
Address: 6536 GROSVENOR
City-St-Zip: ORLANDO, FL 32835

Title: TD () Delete
Name: EMBREE, DARLENE
Address: 6540 PICCADILLY LANE
City-St-Zip: ORLANDO, FL 32835

Title: SEC (X) Delete
Name: DEBOOM, TIMOTHY
Address: 626 BERKS COURT
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: TORTORICE, SAM
Address: 6435 PICCADILLY LANE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CISNEROS, JORGE
Address: 6601 GROSVENOR LANE
City-St-Zip: ORLANDO, FL 32835

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: D (X) Change () Addition
Name: BELLE, MARCIE
Address: 6460 PICCADILLY LANE
City-St-Zip: ORLANDO, FL 32835

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: DARLENE L EMBREE

TD

10/03/2008

Electronic Signature of Signing Officer or Director

Date