


FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Mar 11, 1999 8:00 am**  
**Secretary of State**

03-11-1999 90087 040 \*\*\*\*61.25

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N31477**

1. Corporation Name

**WESTSIDE CORPORATE CENTER ASSOCIATION, INC.**

Principal Place of Business

C/O JAMES M. HERRON  
 3600 N.W. 82ND AVENUE  
 MIAMI FL 33166

Mailing Address

C/O JAMES M. HERRON  
 3600 N.W. 82ND AVENUE  
 MIAMI FL 33166



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		04/03/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0267651	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution	
24		29			
Country		Country			
25		30			

9. Name and Address of Current Registered Agent

O'MEARA, VICKI A  
 3600 N.W. 82ND AVE  
 MIAMI FL 33166

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYAN, GLYNIS A	1.2 NAME	
STREET ADDRESS	3600 N.W. 82ND AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	1.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOODE, R. RAY	2.2 NAME	
STREET ADDRESS	3600 NW 82ND AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUSTON, EDWIN A	3.2 NAME	
STREET ADDRESS	3600 NW 82ND AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	AT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRON, GAIL D	4.2 NAME	
STREET ADDRESS	3600 NW 82ND AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	4.4 CITY-ST-ZIP	
TITLE	S <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHOZIANIN, H. JUDITH	5.2 NAME	VICKI A. O'Meara
STREET ADDRESS	3600 NW 82ND AVENUE	5.3 STREET ADDRESS	3600 NW 82 Ave
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	Miami, FL 33166
TITLE	AT <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE SQUZA, JACQUELINE S	6.2 NAME	
STREET ADDRESS	3600 NW 82ND AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

George Duarte

Asst. Treas. 2/16/99

CR2E037 (11/98)

N31477

216754-90087-40

11/02/98

**WESTSIDE CORPORATE CENTER, INC.**  
(Florida)

**OFFICERS**

R. RAY GOODE	PRESIDENT
GLYNIS A. BRYAN	VICE PRESIDENT & TREASURER
JOSHUA HIGH	VICE PRESIDENT
EDWIN A. HUSTON	VICE PRESIDENT
J. WAYNE JOHNSON	VICE PRESIDENT - RISK MANAGEMENT
VICKI A. O'MEARA	VICE PRESIDENT & SECRETARY
GLENN A. SCHNEIDER	VICE PRESIDENT
H. JUDITH CHOZIANIN	ASSISTANT SECRETARY
W. DANIEL SUSIK	SENIOR ASSISTANT TREASURER
JACQUELINE S. DE SOUZA	ASSISTANT TREASURER
JORGE DUARTE	ASSISTANT TREASURER
WILLIAM A. GARCIA	ASSISTANT TREASURER
MICHAEL T. LYNOTT	ASSISTANT TREASURER
GAIL D. PERRON	ASSISTANT TREASURER

**DIRECTORS**

M. ANTHONY BURNS - CHAIRMAN  
R. RAY GOODE  
EDWIN A. HUSTON