2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N42015

1. Entity Name

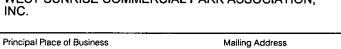
3325 S UNIVERSITY DRIVE

DAVIE, FL 33328 US

WEST SUNRISE COMMERCIAL PARK ASSOCIATION.



FILED May 01, 2007 08:00 A Secretary of State



3325 S UNIVERSITY DRIVE 210

DAVIE, FL 33328 US



DO	NOT	WRITE	IN .	THIS	SPACE
_					

04262007 No Chg-NP CR2E037 (4/06)

4.	FEI Number		Applied For
	65-0339822		Not Applicable
5.	Certificate of Status Desired	\$8.7	Additional

6. Name and Address of Current Registered Agent

COHEN, HAL J

DO NOT WRITE

SUITE 210 DAVIE, FL 33328		IN THIS SPACE			
 The above named entity submits this statement for the put the obligations of registered agent. SIGNATURE		***************************************			
Signature, typed or printed name of registered agent and title if a Filling Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be	DATE		
10. OFFICERS AND DIRECT TITLE PD NAME COHEN, HAL J STREET ADDRESS CITY-ST-ZIP DAVIE, FL 33328 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		N.	000000752371 05/21/07-80013-022 61.25		
STREET ADDRESS DITY-ST-ZIP					

r nereby 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 sustee 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 attachatent with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

וויין מייניים מייניים

Daytime Phone #