

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003970

FILED
Feb 05, 2007
Secretary of State

Entity Name: WOODBRIAR WEST GROUP, INC.

Current Principal Place of Business:

13807 BRIARTHORN DRIVE
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

13807 BRIARTHORN DRIVE
TAMPA, FL 33625

New Mailing Address:

FEI Number: 59-3270257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALL, MELODY
13807 BRIARTHORN DR
TAMPA, FL 33625

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: P () Delete
Name: CIRCHRILLO, JOE
Address: 7203 WOODBROOK DR
City-St-Zip: TAMPA, FL 33625

Title: VP () Delete
Name: MCTEER, WILLIAM
Address: 14209 BRIARTHORN DRIVE
City-St-Zip: TAMPA, FL 33625

Title: S () Delete
Name: HOEL, RONALD
Address: 14301 BRIARTHORN DR
City-St-Zip: TAMPA, FL 33625

Title: T () Delete
Name: JACOBS, JAMES
Address: 7220 WOODBROOK DRIVE
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: BURKHARDT, GINA
Address: 7212 TIMBER COURT
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: BALL, MELODY
Address: 13807 BRIARTHORN DR
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES JACOBS

T

02/05/2007

Electronic Signature of Signing Officer or Director

Date