

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003846

FILED
Feb 08, 2006
Secretary of State

Entity Name: WESTFEST AT ST. LUCIE WEST, INC.

Current Principal Place of Business:

1850 FOUNTAINVIEW BLVD
PORT ST. LUCIE, FL 34986 US

New Principal Place of Business:

10521 S W VILLAGE CENTER DR
SUITE 201
PORT ST. LUCIE, FL 34987 US

Current Mailing Address:

1850 FOUNTAINVIEW BLVD
STE 201
PORT ST LUCIE, FL 34986

New Mailing Address:

10521 S W VILLAGE CENTER DR..
STE 201
PORT ST LUCIE, FL 34987

FEI Number: 65-0775924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, EVETT L
145 NW CENTRAL PARK PLAZA, SUITE 200
PORT ST. LUCIE, FL 34986 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: P () Delete
Name: ROWLEY, JANE
Address: 1850 FOUNTAINVIEW BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: T () Delete
Name: ROSMARIN, BARBARA
Address: 572 SW NEWCASTLE CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: FVP () Delete
Name: ROSMARIN, JERRY
Address: 572 SE NEWCASTLE CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROWLEY, JANE
Address: 10521 S W VILLAGE CENTER DR S 201
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: JANE ROWLEY

PRES

02/08/2006

Electronic Signature of Signing Officer or Director

Date