2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N98000005154

1. Entity Name
CF WEST LAKE CORPORATE CENTER ASSOCIATION.



FILED

Apr 06, 2007 8:00 am Secretary of State

04-06-2007 90027 045 ****61.25

INC.		·								
360 CENTRAL AVENUE 360 SUITE 1570 SUIT		Mailing Address 360 CENTRAL AVENUE SUITE 1570			40	A21290				
	BURG, FL 33701	ST. PETERSBURG, FL 337	01							
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address					60 11 7010 5 11		(8) 11 58	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			01222007 C	Chg-NP	CR2E03	7 (12/06)		
City & State		City & State			4. FEI Number 59-35472	67			pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of S	Status Desired		8.75 Add ee Require		
·	6. Name and Address of Current Ro	egistered Agent			7. Name and Ad	dress of New R	egistered A	gent		
OSPREY MANAGEMENT COMPANY			Name							
	RAL AVENUE		Street Add	Street Address (P.O. Box Number is Not Acceptable)						
ST. PETE	RSBURG, FL 33701									
			City				FL	Zip Cod	е	
	named entity submits this statement for t tions of registered agent.	he purpose of changing its reg	istered office or re	registere	d agent, or both, i	n the State of Flo	rida. I am fa	amiliar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable (NOTE: Re	gistered Agent signature	e required w	rhen reinstating)		DATE			
			9. Election Campaign Financing Trust Fund Contribution.							
	Filing Fee is \$61.25 Due by May 1, 2007			_ ;	\$5.00 May Be Added to Fees		ake check ida Depart			
10.	-	Trust Fund Cont	tribution.	A L	\$5.00 May Be Added to Fees DOITIONS/CHANG	Flori	ida Depart	ment of S	tate	
10. TITLE	OFFICERS AND DIRE	Trust Fund Cont	11.	A L	Added to Fees	Flori GES TO OFFICER	ida Depart	ECTORS IN	tate	
TITLE NAME	OFFICERS AND DIRE PD DIMARIO, JOSEPH A	Trust Fund Cont	11.	A L	Added to Fees	Flori GES TO OFFICER	ida Depart	ECTORS IN	tate	
TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD DIMARIO, JOSEPH A ONE FINANCIAL PLAZA SUITE 22	Trust Fund Cont	11. TITLE NAME STREET ADDRESS	AL A	Added to Fees DDITIONS/CHANC	Flori GES TO OFFICER ARK Sour	ida Depart	ECTORS IN	tate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2007 OFFICERS AND DIRE PD DIMARIO, JOSEPH A ONE FINANCIAL PLAZA SUITE 22 FT LAUDERDALE, FL 33394	Trust Fund Cont	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	AL P\D STROU 360 C St. Pe	Added to Fees	Flori GES TO OFFICER ARK Sour	ida Depart	ECTORS IN	tate	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2007 OFFICERS AND DIRE PD DIMARIO, JOSEPH A ONE FINANCIAL PLAZA SUITE 22 FT LAUDERDALE, FL 33394	Trust Fund Cont	TITLE THE STREET ADDRESS CITY-ST-ZIP NAME NAME NAME	AL PAD 360 CO St. PO VPD	Added to Fees DDITIONS/CHANC	Flori GES TO OFFICER ARK Sour FL 3370 RIDE M.	ida Depart	ECTORS IN	tate	
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12. I hereby 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 trustee 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 attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

Lightly British Name of Signing Officer or Director TLYNETTE BATCHELER, DESECRETARY

727.898.8500