

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90042 024 ****61.25

DOCUMENT # N99000004383 1. Entity Name WEST FLORIDA LIVERY ASSOCIATION, INC.			
Principal Place of Business 3535 FIRST AVE N SAINT PETERSBURG, FL 33713		Mailing Address PO BOX 16226 CLEARWATER, FL 33766	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address PO Box 270219 Suite, Apt. #, etc.	
City & State Zip		City & State Tampa, FL Zip 33688	
Country USA		4. FEI Number 59-3027990	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Name and Address of Current Registered Agent MEKLER, IRVIN 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685		7. Name and Address of New Registered Agent Name KEN WITTCOFF Street Address (P.O. Box Number is Not Acceptable) 11744 LIPSEY ROAD City TAMPA FL Zip Code 33618	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u><i>Kenneth B. Wittcoff</i></u> SECRETARY/TREASURER <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>1/21/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MEKLER, IRVIN 3371 TANGLEWOOD TRAIL PALM HARBOR, FL 34685	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MICKEY VELILLA 13584 44th ST. NORTH #10 CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SHAW, DAVE 7880 128TH ST N SEMINOLE, FL 33776	TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD KEN WITTCOFF PO BOX 270219 TAMPA, FL 33688
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD NEWMAN, KEITH 3535 FIRST AVE N SAINT PETERSBURG, FL 33713	TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD KEN WITTCOFF PO BOX 270219 TAMPA, FL 33688
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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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.			
SIGNATURE: <u><i>Kenneth B. Wittcoff</i></u> (KENNETH B. WITTCOFF) <small>SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR</small>		DATE <u>1/21/07</u> DAYTIME PHONE # <u>(813) 969-2511</u>	

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