

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 31, 2006
Secretary of State**

DOCUMENT# N99000004573

Entity Name: WESTMINSTER SERVICES, INC.

Current Principal Place of Business:

80 W. LUCERNE CIRCLE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

80 W. LUCERNE CIRCLE
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-3614812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEITH, HENRY T
80 W. LUCERNE CIRCLE
ORLANDO, FL 32801 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: D () Delete
Name: BOGNER, JAMES B
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: EVP () Delete
Name: EMERSON, JAMES F
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: T () Delete
Name: KEITH, HENRY T
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: STURM, RICHARD V
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: P/D () Delete
Name: WHITE, JAMES E
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: DYE, STEPHEN R
Address: 80 W. LUCERNE CIRCLE
City-St-Zip: ORLANDO, FL 32801

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
Name:
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 F EMERSON

EVP

01/31/2006

Electronic Signature of Signing Officer or Director

Date