2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050399

Address:

City-St-Zip:

100 NECK RD.

OLD LYME, CT 06371

Entity Name: WEST MAIN STREET, INC.

FILED Jan 23, 2008 Secretary of State

•		,		
Current Principal Place of Business:			New Principal Place of Business:	
428 KINGS NAPLES,				
Current Mailing Address:			New Mailing Address:	
100 NECK OLD LYME	(RD E, CT 06371			
FEI Number: 59-3648037 FEI Number Applied For ()			FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
		DRTH, SUITE 300 IS		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,
SIGNATU				
	Electron	nic Signature of Registered Age	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D (STOUT, CHER' 1 WEST SHOR OLD SAYBROO	E DR.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (STOUT, RICHA 1 WEST SHOR OLD SAYBROO	E DR.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (STOUT, THOM 13 HOLMES R OAKDALE, CT	D.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (STOUT, MICHA 15 SUNSET RI OLD SAYBROO).	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (STOUT, RICHA	Delete RD W III	Title: Name:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: RICHARD W. STOUT III SECY 01/23/2008