2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# P00000116447

Entity Name: WEST HEALTHCARE, INC.

Current Principal Place of Business:

1611 STATE RD 15A
SUITE 3
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

PO BOX 9720
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 65-1063780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BATTREALL, CATHY
105 CLUB FOREST LANE
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

BATTREALL, CATHY
87899 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036 US

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: CATHY BATTREALL 02/04/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WEST, CLEVELAND D
Address: 55342 CLAIRE ST
City-St-Zip: ASTOR, FL 32102

Title: SVPD ( ) Delete
Name: BATTREALL, CATHY
Address: 105 CLUB FOREST LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WEST, CLEVELAND D
Address: 87899 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: SVPD (X) Change ( ) Addition
Name: BATTREALL, CATHY
Address: 87899 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

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.

SIGNATURE: CATHY BATTREALL SVPD 02/04/2009
Electronic Signature of Signing Officer or Director Date