2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045564

Entity Name: WEST DELRAY INVESTMENT CORPORATION

FILED Sep 13, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7 CROSLEY LANE 3980 AIRPORT RD

SEBRING, FL 33870 **BOX #7**

BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

1033 RHODES VILLA AVE 7 CROSLEY LANE SEBRING, FL 33870 DELRAY BEACH, FL 33483

FEI Number: 75-3057240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PASQUALE, ANTHONY F PASQUALE, ANTHONY F 1033 RHODES VILLA AVE 2395 S OCÉAN DRIVE HIGHLANDS BEACH, FL 33487 DELRAY BEACH, FL 33483

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: ANTHONY F. PASQUALE 09/13/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

Address: City-St-Zip: Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete PASQUALE, ANTHONY F PASQUALE, ANTHONY F Name: 2395 S OCEAN DRIVE Address: 1033 RHODES VILLA AVE HIGHLANDS BEACH, FL 33487 City-St-Zip: DELRAY BEACH, FL 33483

Title: CEO (X) Delete Title: () Change () Addition

CLARK, STEVEN S Name: Name: 1100 SW LAKEVIEW DRIVE Address: Address: SEBRING, FL 33870 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY F. PASQUALE **PRES** 09/13/2004