2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100705

Entity Name: ATLANTIC WEST DEVELOPMENT CORPORATION

FILED Jan 20, 2005 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:		
3775 AIRPORT RD N SUITE B NAPLES, FL 34105					
Current Mailing Address:			New Maili	ng Address:	
3775 AIRPORT RD N SUITE B NAPLES, FL 34105					
FEI Number: 2	20-1274953	FEI Number Applied For () FEI N	lumber Not Appl	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GAY, GARY R 3775 AIRPORT RD N SUITE B NAPLES, FL 34105 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:					
Electronic Signature of Registered Agent Date					
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E GAY, GARY R 3775 AIRPORT R NAPLES, FL 341		Title: Name: Address: City-St-Zip:	P/D (X) Change () Addition GAY, GARY R 3775 AIRPORT RD N SUITE B NAPLES, FL 34105	
Title: Name: Address: City-St-Zip:	D () E JACKSON, GARY 915 VERSAILLES MAITLAND, FL 3	CIRCLE	Title: Name: Address: City-St-Zip:	VP/D (X) Change () Addition JACKSON, CAROLYN 915 VERSAILLES CIRCLE MAITLAND, FL 32751	
Title: Name: Address: City-St-Zip:	S () E FREDRICK, KIME 7930 SAINT IVES N CHARLESTON,	RD #6G	Title: Name: Address: City-St-Zip:	S/D (X) Change () Addition FREDRICK, KIMBERLY 7930 SAINT IVES RD #6G N CHARLESTON, SC 29406	
Title: Name: Address: City-St-Zip:	D () E PAPPAS, JOANN 176 BILBAO DR ST AUGUSTINE,	A	Title: Name: Address: City-St-Zip:	VP/D (X) Change () Addition PAPPAS, JOANNA 176 BILBAO DR ST AUGUSTINE, FL 32086	
Title: Name: Address: City-St-Zip:	D () E PAPPAS, SHERR 176 BILBAO DR ST AUGUSTINE,		Title: Name: Address: City-St-Zip:	VP/D (X) Change () Addition PAPPAS, SHERRI 176 BILBAO DR ST AUGUSTINE, FL 32086	
Title: Name: Address: City-St-Zip:	T () E PAPPAS, STEVE PO BOX 630785 OJUS, FL 33163		Title: Name: Address: City-St-Zip:	VP/D (X) Change () Addition PAPPAS, STEVE PO BOX 630785 OJUS, FL 33163	

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: GARY R. GAY P/D 01/20/2005