2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000081755

Entity Name: CSHELL WEST, INC.

FILED Jan 16, 2008 Secretary of State

US

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

PO BOX 86459 16600 GULF BLVD

ST. PETERSBURG, FL 33738 US 337

NORTH REDINGTON, FL 33708 US

Current Mailing Address: New Mailing Address:

PO BOX 86459

City-St-Zip:

ST. PETERSBURG, FL 33738 US

FEI Number: 20-5060572 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:

WILSEY, STEVEN M WILSEY, STEVEN M

275 FOURTH STREET NORTH
ST. PETERSBURG, FL 337013205 US
1000 16TH STREET NORTH
ST. PETERSBURG, FL 337013205 US
ST. PETERSBURG, FL 33705

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: STEVEN M. WILSEY 01/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

ST. PETERSBURG, FL 33738 US

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

Name: BENTLEY, H BENJAMIN Name:

 Address:
 PO BOX 86459
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33738 US
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 BENTLEY, H BENJAMIN
 Name:

 Address:
 PO BOX 86459
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33738 US
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Title:
 S
 () Delete
 Title:

 Name:
 BENTLEY, H BENJAMIN
 Name:

 Address:
 PO BOX 86459
 Address:

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.

City-St-Zip:

SIGNATURE: H BENJAMIN BENTLEY P 01/16/2008