



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000085229 1. Entity Name WEST NORWOOD, INC.	
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Principal Place of Business 2000 WARRINGTON WAY, STE. 163 LOUISVILLE, KY 40222	Mailing Address 2000 WARRINGTON WAY, STE. 163 LOUISVILLE, KY 40222
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DO NOT WRITE IN THIS SPACE

	
01042008	No Chg-P CR2E034 (11/05)
4. FEI Number 61-1282805	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FALK, JACK A. JR. 550 BILTMORE WAY, STE. 810 DUNWODY, WHITE & LANDON, P.A. CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GHEE, JOHN 1898 SE PORT ST. LUCIE BLVD. PT. ST. LUCIE, FL 34952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OS MURR, ANTHONY W. 2000 WARRINGTON WAY, STE. 163 LOUISVILLE, KY 40222
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<p>U00000774881 01/08/08-80008-008 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anthony W. Murr* **1/4/08** **502-581-0070**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #