

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000104626

FILED
Apr 30, 2009
Secretary of State

Entity Name: WESTSHORE PIZZA BOYETTE, INC.

Current Principal Place of Business:

11643 BOYETTE ROAD
UNIT 113
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

11643 BOYETTE ROAD
UNIT 113
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 20-1309403 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSO, JOSEPH C ESQ.
3708 WEST EUCLID AVE.
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

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:

Title: DPST () Delete
Name: WAGNER, RILEY
Address: 2224 KENWICK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: DVP () Delete
Name: CHERRY, WILLIAM L
Address: 10401 ELBERTON AVE
City-St-Zip: THONOTOSASSA, FL 33592

Title: DVP () Delete
Name: NEAL, GREGORY
Address: 3901 KALEWOOD PLACE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: VASATURO, ROBERT D
Address: 341 CHANNELSIDE DRIVE
City-St-Zip: TAMPA, FL 33611

Title: DVP (X) Change () Addition
Name: NEAL, GREGORY
Address: 10109 BELLCREEK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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: GREGORY NEAL

DVP

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date