FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300009312 (8)

WESTCO DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address 1172 S.W. 30TH STREET, SUITE 400 1172 S.W. 30TH STREET, SUITE 400 PALM CITY FL 34990 PALM CITY FL 34990-2998 3. Date Incorporated or Qualified Sa. Date of Last Report 02/01/1993 03/08/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0386211 21 26 Not Applicable Suite, Apt. #. etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WEST, BRIAN G 1172 S.W. 30TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 83 PALM CITY FL 34990 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if appricable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6)**DPVS** TITLE DELETE 1.5 TITLE ☐ Change Addition WEST, BRIAN G 1.2 NAME NAME CR2E034 1172 S.W. 30TH STREET, #400 1.3 STREET ADDRESS STREET ADDRESS PALM CITY FL 34990 CITY ST-712 14 City-ST-ZIP DELETE Change Addition 2.1 Title TITLE WEST, BRAIN G 2.2 NAME NAME 1172 S.W. 30TH STREET, #400 2.3 STREET ADDRESS STREET ADDRESS PALM CITY FL 34990 CITY - ST - ZIP 2.4 CITY - ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY - \$1 - 20 DELETE 41 TITLE ☐ Change ☐ Addition 111 E NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP Crity - ST- ZIP DELETE Addition Change TITLE 5.1 TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST-ZIP Addition DELETE 6.1 TITLE Change NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Wock 13 if changed, or on an attachment with an address.

FILED

Apr 30 1997 8:00am

Secretary of State