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FILED  
May 01 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000088832 (9)

1. Corporation Name

WESTFIELD DEVELOPMENT CORPORATION



Principal Place of Business

Mailing Address

107 DUNBAR AVENUE, SUITE I  
OLDSMAR FL 34677

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OLDSMAR FL 34677

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1993

2. Principal Place of Business

2a. Mailing Address

21 4350 W Cypress St

26 4350 W Cypress St

4. FEI Number

36-3073399

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23 City & State

28 City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24 Zip

Country

29 Zip

Country

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOLOMAN, STANFORD R  
101 EAST KENNEDY BLVD  
SUITE 1818  
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DPT ☐ DELETE

NAME GATEWOOD, ROGER B.  
STREET ADDRESS 107 DUNBAR AVE, SUITE I  
CITY-ST-ZIP OLDSMAR FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE VS ☒ DELETE

NAME MORDINI, GLENN  
STREET ADDRESS 107 DUNBAR AVE., STE. I  
CITY-ST-ZIP OLDSMAR FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME MESSERLY, MARK  
STREET ADDRESS 107 DUNBAR AVE, SUITE I  
CITY-ST-ZIP OLDSMAR FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE V ☒ DELETE

NAME TURAIN, GREG  
STREET ADDRESS 107 DUNBAR AVE, SUITE I  
CITY-ST-ZIP OLDSMAR FL

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE VS ☐ DELETE

NAME BERGER, ANDREW  
STREET ADDRESS 107 DUNBAR AVE, SUITE I  
CITY-ST-ZIP OLDSMAR FL

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE AST ☐ DELETE

NAME THIBODEAU, DARLENE  
STREET ADDRESS 107 DUNBAR AVE., STE. I  
CITY-ST-ZIP OLDSMAR FL

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE

DARLENE THIBODEAU

11/23/98 (112)874-9872

11/23/98 (112)874-9872

CR2E034 (10/97)