

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 18, 1999 8:00 am
Secretary of State

06-18-1999 90012 016 ***558.75

DOCUMENT # **P93000088832** ✓

1. Corporation Name

WESTFIELD DEVELOPMENT CORPORATION

Principal Place of Business

**4350 W CYPRESS ST
#640
TAMPA FL 33607**

Mailing Address

**4350 W CYPRESS ST
#640
TAMPA FL 33607**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1993

4. FEI Number

36-3073399

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name **Schlosser, Richard A.**

82 Street Address (P.O. Box Number is Not Acceptable)
500 East Kennedy Blvd.

83 Suite 200

84 City **Tampa, FL**

85 Zip Code **33602**

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]
Signature, typed or printed name of registered agent and title if applicable.

RICHARD A. SCHLOSSER

(NOTE: Registered Agent signature required when reinstating)

DATE

6-15-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D GATEWOOD, ROGER B.**
STREET ADDRESS **4350 W CYPRESS ST SUITE 640**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☐ DELETE
NAME **P MESSERLY, MARK**
STREET ADDRESS **4350 W CYPRESS ST SUITE 640**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☐ DELETE
NAME **V BERGER, ANDREW**
STREET ADDRESS **4350 W CYPRESS ST SUITE 640**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☒ DELETE
NAME **VS THIBODEAU, DARLENE**
STREET ADDRESS **4350 W CYPRESS ST SUITE 640**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☒ DELETE
NAME **VS BERGER, ANDREW**
STREET ADDRESS **107 DUNBAR AVE, SUITE I**
CITY-ST-ZIP **OLDSMAR FL**

TITLE ☒ DELETE
NAME **AST THIBODEAU, DARLENE**
STREET ADDRESS **107 DUNBAR AVE., STE. I**
CITY-ST-ZIP **OLDSMAR FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **Vice President/Treasurer**
1.3 STREET ADDRESS **Baker, Frank**
1.4 CITY-ST-ZIP **4350 W. Cypress Street
Tampa, FL 33607**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK S. BAKER **6/15/99** **(813) 874-9872**
Date Daytime Phone #

CR2E034 (11/98)

0387785