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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000021976 (3)

WESTCOTT PROPERTIES, INC.

Principal Place of Business			Ma	Mailing Address					
1831 N BELCHER RD SUITE G-3 CLEARWATER FL 34825			SU	1831 N BELCHER RD SUITE G-3 CLEARWATER FL 34825-1417					
				J				3. Date Incorporated or Qualified 3s. Date of Last Report 03/18/1994 05/01/1996	
2. Principal Place of Business				2a. Mailing Address				4, FEI Number Applied For	
21				26				<b>59-3234550</b> Not Applicable	le
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
City & State				City & State				Fee Required	
23				28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution □ Added to Fees	
Zip Country			20	Zip Country				This corporation has liability for intangible tax under s. 199.032,	$\dashv$
24	25		29	30				Florida Statutes  Yes  No	
	g, Name	and Address of Cu		lered Agent				10. Name and Address of New Registered Agent	$\dashv$
SHE	LNUTT, RO	BERT C				81	Name	ne	
1831 N BELCHER RD						82	Stroot	et Address (P.O. Box Number is Not Acceptable)	
SUITE G-3						0	Olloot /	of Address (1.0. Dox Administration Addeptable)	
CLEARWATER FL 34625									
		$\sim$	^			84	City	FL 85 Zip Code	
H. Burguest to the gradient of New York				LC07 1509 Clayida Ctalutas the above			namod	ord corporation submits this statement for the pursons of changing its registered	$\Box$
<ol> <li>Pursuant to the provisions of Sictions (01:0192 and 607:1508, Florida Statutes, the ab office or registered agent or both, at the State of Florida Such change was authorized agent. I am familiar with, as the content of the florida State.</li> </ol>							the corp	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I heroby accept the appointment as registered	,
_	in temilior w	iri, at the contraction	MANAGERS CI	, xiertion 607.0505,				A TOUES Ulaglar	
SIGNATURE	Signatur, typed	or printed name of registere	ed agent and title	if a rollicable (N	IOIL Registr	HAE Hed Age	nt signature	ure required when reinstating) DATE	
12.	7	OFFICERS	AND DIREC	YORS	18		<u></u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			DELFTE		1.1 TOLE		Change Additio	ın
NAME				•		1.2 NAME			
STREET ADDRESS				1. <b>3</b> S		STREET	ADDRESS	S	
CITY-ST-ZIP		ATER FL 34624			1.4	CITY-S	T-ZIP		
TITLE	D	150		☐ DELETE	2.1	TITLE		Change Additio	ıD
NAME	KEN JOH		0.0			NAME			
STREET ADDRESS	ALPHOUGHTED PI					2 3 STREET ADDRESS		\$	
CITY-ST-ZIP	CLEARW	AIER FL		DELETE		4 CITY-S	I - 7/P	Change Laddin	_
TITLE NAME				□ Delt it	1	TITLE		Change Additio	21
	RECC				3.2 NAME 3.3 STREET ADE		LODDECCC.		
STREET ADDRESS CITY-ST-ZIP						I SINEEI I. CITY-S		5	
TITLE				☐ DELETE		i TITLE	01-215	☐ Change ☐ Additio	
NAME					1	2 NAME			
STREET ADDRESS							AODRESS	s	
CITY-ST-ZIP						CHY-S			
TITLE				DELETE		TITLE		Change Addition	яп П
NAME					5.2 N				
STREET ADDRESS					5.8	STREET	ADDRESS	s	
CITY-ST-ZIP					5.4	CITY-S	1 - 712		
TITLE				DELETE	6.1	TITLE		Change Addition	'n
NAME					6.2	NAME			
STREET ADDRESS					6.8	STREET	ADDRESS	S	

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 eath; 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 3 if changed, or on an altachment with an address.