

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000052449

FILED
Apr 08, 2009
Secretary of State

Entity Name: WEST PALM MOTEL CORPORATION

Current Principal Place of Business:

460 LANE AVE S.
JACKSONVILLE, FL 32234 US

New Principal Place of Business:

Current Mailing Address:

460 LANE AVE S.
JACKSONVILLE, FL 32234 US

New Mailing Address:

FEI Number: 65-0503611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PATEL, ASHOK
460 LANE AVE SOUTH
JACKSONVILLE, FL 32254 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: P () Delete
Name: PATEL, ASHOK
Address: 1075 S MAIN STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: S () Delete
Name: PATEL, NAVNIT
Address: 834 CARAWAY CT
City-St-Zip: WELLINGTON, FL 33430

Title: VP () Delete
Name: PATEL, SHILPA A
Address: 834 CARAWAY CT
City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete
Name: PATEL, DHARMISTA N
Address: 834 CARAWAY CT
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PATEL, ASHOK
Address: 460 LANE AVE. S
City-St-Zip: JACKSONVILLE, FL 32254

Title: S (X) Change () Addition
Name: PATEL, NAVNIT
Address: 460 LANE AVE. S
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP (X) Change () Addition
Name: PATEL, SHILPA A
Address: 460 LANE AVE S
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP (X) Change () Addition
Name: PATEL, DHARMISTA N
Address: 460 LANE AVE S
City-St-Zip: JACKSONVILLE, FL 32254

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: ASHOK J PATEL

P

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date