
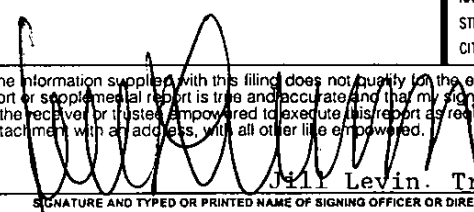


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90114 036 ***150.00

DOCUMENT # P95000032150 1. Entity Name WEST BOCA SQUARE CORPORATE, INC.					
Principal Place of Business 21301 POWERLINE RD SUITE 312 BOCA RATON, FL 33433 US			Mailing Address P.O. BOX 11229 KNOXVILLE, TN 37939 US		
2. Principal Place of Business 925 SOUTH FEDERAL HIGHWAY		3. Mailing Address Suite, Apt. #, etc. SUITE 425 City & State BOCA RATON, FL			
Suite, Apt. #, etc. SUITE 425		Suite, Apt. #, etc. SUITE 425		4. FEI Number 59-3317799	
City & State BOCA RATON, FL		City & State BOCA RATON, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33432		Country US		6. Name and Address of Current Registered Agent WALTERS, CLIFFORD L 802 11TH STREET WEST BRADENTON, FL 34205	
Zip 33432		Country US		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LEVIN, RICHARD 1733 WEST FLETCHER AVENUE TAMPA, FL 33612	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS LEVIN, STEVEN 21301 POWERLINE ROAD SUITE #312 BOCA RATON, FL 33433	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LEVIN, JILL 5410 HOMBERG DR STE KNOXVILLE, TN 37919	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FERRUCCI, MARK A 1209 ORANGE STREET WILMINGTON, DE 19801	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD RICE, SUZANNE L 1733 W. FLETCHER AVE. TAMPA, FL 33612	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LEVIN, RICHARD 340 S PALM AVENUE, APT. 45 SARASOTA FL 34236	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS LEVIN, STEVEN 925 SOUTH FEDERAL HIGHWAY, SUITE 425 BOCA RATON, FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS LEVIN, STEVEN 925 SOUTH FEDERAL HIGHWAY, SUITE 425 BOCA RATON, FL 33432	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS LEVIN, STEVEN 925 SOUTH FEDERAL HIGHWAY, SUITE 425 BOCA RATON, FL 33432	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS LEVIN, STEVEN 925 SOUTH FEDERAL HIGHWAY, SUITE 425 BOCA RATON, FL 33432	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Jill Levin, Treasurer 3/24/06 (865) 584 4175					